

1992

Correlates of filial responsibility among Malay families in Selangor, Malaysia

Tengku Aizan Binti Tengku Abdul Hamid
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**Correlates of filial responsibility among Malay families in
Selangor, Malaysia**

Abdul Hamid, Tengku Aizan Binti Tengku, Ph.D.

Iowa State University, 1992

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Correlates of filial responsibility among Malay families in
Selangor, Malaysia

by

Tengku Aizan Binti Tengku Abdul Hamid

A Dissertation Submitted to the
Graduate Faculty in Partial Fulfillment of the
Requirements for the Degree of
DOCTOR OF PHILOSOPHY

Department: Human Development and Family Studies
Major: Human Development and Family Studies

Approved:

Members of the Committee:

Signature was redacted for privacy.

In ~~Charge~~ of Major Work

Signature was redacted for privacy.

For ~~the~~ Major ~~Department~~

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For the Graduate College

Iowa State University
Ames, Iowa

1992

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CHAPTER 1. INTRODUCTION

Purpose of the Study

The primary purpose of the study is to investigate the correlates of filial responsibility among the Malays. Filial responsibility among Malays is one of the tenets of Islamic teaching, and the performance of the responsibility is expected of every Muslim.

Respect of elders has strong roots in the culture of Malaysians. The society strongly values the tradition of filial piety and family support toward aged members. Yet in modern Malaysia the strong adherence to this value seems to be declining (Ministry of Welfare Services, 1982).

Filial responsibility performance is taken for granted, and it is assumed that every individual will carry out his/her duties toward the elderly family members. The concept is broad, and what it entails remains a personal matter. In view of the changing Malaysian society, what, then, are the kinds of duties or types of care and services that a filially responsible child should provide for the aged parents? How should the duties be performed in relation to the child's own nuclear family? What is expected from the adult children? Will mothers and fathers hold similar expectations? These are questions that need to be addressed in order to elucidate the

requirements of filial responsibility in a transitional society like Malaysia.

The specific objectives of this study are to:

1. examine the descriptive characteristics of the aged parents and the adult children samples in terms of sociodemographic characteristics, living conditions, and health status.
2. examine the filial responsibility behaviors of aged parents and adult children.
3. investigate the filial responsibility expectation of aged parents and adult children.
4. determine the predictors of filial responsibility of aged parents and adult children.

Need of Study

The phenomenon of a population that is aging is new to the developing countries, and the aging of the population is slowly making its presence felt. Statistics clearly show that the proportion and number of aged in Malaysia are on the increase. The percentage of those 60 years and older for Peninsular Malaysia was 5.6 in 1980 and 5.9 in 1984 (Normah & Quah, 1986).

In 1980, the median age of the population was 19.8, and was projected to be 24.3 in the year 2000 and 32.1 in the year

2030 (Masitah, 1985), thus suggesting a decreasing youthfulness of the total population. Besides, in 2030 Malaysia will be categorized as an aged nation, when the proportion of the aged 60 years and over will make up more than 15% of the total population (Masitah, 1985). Further, the estimated life expectancy at birth for Peninsular Malaysia in 1988 for males and females was 69 and 73 years old, respectively (Dept. Statistics, 1987). The difference in life expectancy between males and females means that there will be more females than men living to older ages.

These demographic trends have strong implications for family life. The median age at first marriage has increased. Men born in the 1946-50 cohort were marrying at an average age almost two years older than men born 25 years earlier (Dept. Statistics, 1983).

A similar trend was observed for females. The 1947 census showed that 42% of women 15-19 had married, but between 1984-85 just 6% of women in the same age category were married (Arshat, Tan, Tay, & Subbiah, 1988). In contrast, there has been some increase in the proportion of women aged 35-39 who never married, from 2% in 1947 to 7% in 1984/85 (Arshat et al., 1988). The increase in age at first marriage may be the result of widespread educational opportunities for both genders.

The delay in family formation affects the fecundity of the family. In 1980, the average family size for all women in Peninsular Malaysia was four persons, compared to five persons per family in 1970 (Dept. Statistics, 1983). The declining fertility rate is reflected when comparing rates per thousand women in 1961 of 40.3, reduced to 32.4 in 1980, and projected to decline to 24.0 and 16.4 in the years 2000 and 2030, respectively (Masitah, 1985). Moreover, the total fertility rate in 1957 was 6.8 and in 1980 it was 3.7, a reduction of 50% (Masitah, 1985).

Along with the reduction in family size is the movement toward the formation of a nuclear family living arrangement. The nuclear family represented 55% of all household types, while the extended family represented 28% of the household types (Dept. Statistics, 1983).

Furthermore, the emancipation of women into the labor force has increased. Forty percent of all Malaysian women now work (Strange, 1981). In 1947, the activity rate for females aged 10 years and older was 25%. For women 15-65 years of age, their participation rate was 44% in 1981, 40% in 1982, and 46% in 1983 (Jamilah, 1987).

As indicated earlier, the family has undergone considerable change. The ebb and flow of these changes will continue into the future. Changes in family structure affect its functions. Further, the declining fertility rates will

mean fewer children for future cohorts of elderly to draw on for support. Similarly, the increased participation of women in the labor force will undermine the ability of women to maintain the current level of support to older family members. At the same time, the society continues to value strongly the tradition of family support for aged members. Thus, women are placed in a difficult position.

In summary, the structural changes in Malaysian families, such as delayed marriages, development of nuclear family households, smaller family size, and increased participation of women in the labor force, will affect the caretaking behaviors of family members, especially of the women who traditionally perform these roles. The repercussions of the structural changes in families' caregiving behaviors toward the elderly have yet to surface in Malaysia, but the experiences of the western nations calls attention to the emerging issues of an aging population in the midst of the changing social-economic environment in Malaysia.

In the United States, caregiving for an older family member occurs for a variety of reasons. Some feel an obligation to care, and to repay their parents for all they have done in the past, whereas others may be motivated by guilt feelings for something that happened in their past relationship with older persons (Springer & Brubaker, 1984). For whatever reasons the caregiving behavior exists, the

demographic variables do influence the opportunities for and pattern of caregiving to parents. Soldo and Myers (1976) suggested that each additional child ever born reduces the probability that a person would live in an institution. Further, Soldo, Wolf, and Agree (1990) implied that the availability of children, rather than number of children, increases the opportunities of informal care for parents. However, if the child is employed, the potential help to the parent will be reduced.

Steuve and O'Donnell (1989) reported that women with full-time jobs tended to interact less often with their parents and were generally less available to provide instrumental support. On the other hand, full-time homemakers and part-time workers were more attentive on a day-to-day basis and were more willing to consider the possibility of undertaking long-term care. Similarly, Matthews, Werkner, and Delaney (1989) showed that nonemployed sisters contributed more tangible services than their employed sisters when parents' health was poor.

Further, Cicirelli (1981) found that lower-class or lower-middle-class children were more concerned with direct provision of services to their elderly parents. The middle-class adult children were more likely to provide money, hired help, or indirect provision of services.

The possibility of similar scenarios happening in Malaysia is not remote, because of its rapidly changing society under the impact of modernization, urbanization, and industrialization. Modernization and industrialization tend to undermine and modify traditional family structures and roles.

Studies in caregiving in the United States have documented several factors that influence filial responsibilities of adult children toward the aging parents. Will the same factors operate in similar ways in the Malaysian context?

Studies on filial responsibility in Malaysia are limited in depth and scope. In the Socioeconomic Consequences of the Aging of the Population survey (Masitah & Nazileh, 1986) only two questions were incorporated to measure filial responsibility. One question was on source of financial support, and the second question was on frequency of visits between elderly parents and adult children (Masitah & Nazileh, 1986).

The National Population and Family Development Board in 1987, in conjunction with the Economic and Social Commission for Asia and the Pacific (ESCAP), conducted another study on the older population. This research was part of the ESCAP project "Emerging Issues of the Aging of Population" (other countries included in the project were China, the Republic of

Korea, and Sri Lanka). The basic purposes of the study were to identify financial, instrumental, social, and emotional support that was received by and provided to older people through their informal relationships in households and communities, voluntary organizations, and government services (ESCAP, 1987). In this study, too, the measurement of filial responsibility was limited, even though the purpose was to investigate primary caregiving of elderly respondents. Besides the sociodemographic information, the respondents were interviewed about health conditions, activities of daily living, and who the major care providers were. The study also interviewed the resident primary care provider (RPCP). The interview schedule for RPCP was more in-depth about filial responsibility. The RPCP was asked reasons why they became the major provider of help, the type of care provided, special problems encountered and faced, help received by RPCP from elderly respondents, and the expectation of help from the elderly.

Therefore, the two major research projects described above have limitations in terms of the measurement and scope of filial responsibility. Studies of filial responsibility of adult children toward aged parents have the potential to explain the conditions under which it occurs. Such studies could provide valuable information to the government in terms of future policy development and implementation of programs

that will strengthen family relationships and increase the well-being of the family.

CHAPTER 2. REVIEW OF LITERATURE

The literature review covers empirical information on filial responsibility studies conducted in the United States and information regarding the situation in Malaysia. In the literature, one aspect of filial responsibility that has been the focus of much research is parent care, but the other aspects of filial responsibility have not received much attention.

Therefore, the review of literature is mostly from the caregiving literature. The review of literature is divided into sections inclusive of: (1) conceptualization and measurement of filial responsibility, (2) role of the family in elderly caregiving, (3) factors influencing the role of family members in fulfilling filial responsibility roles, (4) filial responsibility in the Malaysian context, and (5) the theoretical basis of research.

Concept and Measurements of Filial Responsibility

In 1960, filial responsibility research in modern American society was conducted by Schorr. In that research the concept of filial responsibility was defined to be the adult children's duty required by law, by customs, or by personal attitudes to meet the need of the aged parents. Schorr (1980) remarked that the idea of filial responsibility, viewed as the responsibility of children, became prominent

after economic changes loosened the hold of aged parents on property and income.

Later studies have built on Schorr's definitions. Seelbach (1977) defined filial responsibility as attitudes of personal responsibility toward the maintenance of parental well-being.

In 1978 Seelbach equated filial responsibility with the adult offspring's obligation to meet the needs of the aging parents. Similarly, Finch (1989) used the concept of filial obligation to mean the proper things to do for the parents, that is the proper form of obligations between kin.

Hanson, Sauer, and Seelbach (1983) defined filial responsibility as attitudes of personal responsibility toward one's parent. Responsibility emphasized duty, protection, and financial support of children to parents.

The phenomenon of family care or filial responsibility is complex and involves a variety of elements. Dressel and Clark (1990) indicated that family members hold idealized notions of care, but their behaviors and feelings are often at odds with their ideologies. The respondents in their study viewed caring as the underlying element even in most routine interactions among family members. They indicated that whenever the families are together, care is considered present.

From the above literature, there seems to be a consensus on the definition and meaning of filial responsibility. Generally, filial responsibility is defined as personal attitudes of obligation of adult children to meet the needs of the parents. Like attitudes, the interpretations and the performance of filial responsibility can change with time. Moreover, the performance of filial responsibility depends on the adult-child-parent relationships and the life circumstances of the adult child and parents. The attitudes of filial roles then are the product of the social and cultural environment in which a person lives.

The measurements of filial responsibility are more varied than the definition of filial responsibility. Brody, Johnsen, and Fulcomer (1984) used a single-item opinion measure of "what do people think adult children in other families should do to their elderly parents" to measure filial responsibility. Atkinson, Kivett, and Campbell (1986), Hanson et al. (1983), and Roberts and Bengtson (1990) created more complex measures. They developed statements that reflected hypothetical filial responsibility situations that measured filial behaviors and expectations of adult child-parent pairs.

Filial expectation usually relates to the expectation of care and support of parents from their children, and filial behaviors are the caregiving behaviors or the performance of various services and or activities by children for their

parents. Seelbach (1984) used filial behaviors to mean the level of filial aid and support that was received by the aged parents. Finley, Roberts, and Banahan (1988) created a Likert agreement scale on attitudes about filial responsibilities.

Hamon and Blieszner (1990) stressed that earlier instrumentations of filial responsibility expectations were limited in scope. Hamon (1988) developed a new scale which included items that tapped emotive, instrumental, contact, and communicative components of filial responsibility, besides measures of attitudes typically thought of as filial responsibility (i.e., helping when sick, visiting or writing, and giving emotional support).

Despite the various kinds of instruments that have been developed to measure filial responsibility, they may not capture the situations involved in filial responsibility performance between the elderly parent-child pairs. Walker, Pratt, Shin, and Jones (1989) suggested that investigators "should look anew at the concept of filial responsibility" (pg. 207). Furthermore, Dressel and Clark (1990), using a phenomenological approach to the study of family, indicate that family members hold idealized notions of care, but their behaviors and feelings are often at odds with their ideologies. They expressed the need to conceptualize care multidimensionally.

Filial responsibility generally has been viewed as a response to immediate acute need or crisis. But it also involves an important dimension that is seldom considered. According to Seelbach (1984), the prevention aspect is seldom considered in filial responsibility research. He stated that the prevention aspect must be emphasized so that the adult children and their parents can discover and develop ways of living and growing to meet personal and family needs during personal decline and dependence.

This aspect is similar to what Blenkner (1965) termed as filial maturity. Filial maturity is a developmental stage in which the adult child takes on the filial role that involves being depended on by the parents.

In the middle years the children's relationships to the aging parents are no longer as children but as mature adults. This new identification with the older parent promotes mature relationships between adult children and their aged parents (Quinn, 1984). Furthermore, Nydegger (1991) suggested that filial maturity has two dimensions, filial distancing and filial comprehending. Filial distancing is the ability of a child to emancipate from the parent, yet maintain the role of a child. On the other hand, filial comprehending is the ability of the adult child to understand the parent as a person with histories.

Consequently, filial maturity is achieved through long histories of interactions between parents and children. Moreover, Stevenson (1977) related that one of the developmental tasks of the middle years is to provide help to young and old generations without being controlling. This can be acquired through mature relationships.

Quinn (1984) used filial responsibility (maturity) to refer to an adult child's sense of obligation in meeting the need of the aging parents. Thompson (1989) contended that, to be responsible, both aged parents and adult children strived to meet everyone's needs, prevent harm, and take positive actions to promote each other's welfare. Further, Finch and Mason (1990b) argued that relationships between parents and children are founded on a sense of obligation.

According to Seelbach (1978), expectations and behaviors are dimensions of filial responsibility. Further, Hamon and Blieszner (1990) supported the idea that filial expectation is a component of filial responsibility.

Therefore, aligned with the suggestions in the literature, filial responsibility as is used in the study is broadly defined as personal attitudes of obligation of adult children to meet the needs of elderly parents. The filial responsibility concept includes the dimensions of filial expectation, filial maturity, and filial behaviors.

Role of Family in the Care of the Aged

Studies have acknowledged the primary role of family members in the support and care of the aged population (Brody & Schoonover, 1986; Cicirelli, 1983; Hamon & Blieszner, 1990). Doty (1986) has indicated that only one in five elderly with long-term care needs are cared for in nursing homes; the remaining four-fifths live in the community primarily because family and friends provide all or most of the assistance they require. In addition, Kane and Kane (1987) estimated that the percentage of informal long-term care provided by family members is as high as 85%.

Life expectancy has increased dramatically over the years, which may mean that the impaired elderly in need of informal long-term care frequently are likely to have children who are themselves past the retirement age (Doty, 1986). Atchley and Miller (1980) remarked that 10% of the population aged 65 and older have children who are also aged 65+.

Family caregiving literature has often shown that the major carers of the aged parents are middle-aged daughters (Brody, 1981; Brody et al., 1984; Lang & Brody, 1983; Hamon & Blieszner, 1989). Further, Qureshi (1987) stressed the hierarchy of care according to kinship proximity: spouse, adult daughters, sons, and other relatives and friends. These carers differ in age. The spouse caregivers are usually elderly themselves, and the offspring may be in middle age.

The elderly carers, on the other hand, differ from younger carers in that they care for a shorter period, are more likely to provide intimate personal care and heavy nursing tasks associated with terminal care, and are caring for their most significant other, usually a spouse (Wenger, 1990).

The above literature indicates that family members play an important role in caring for the older family members. The role played by family members in family care will be more challenging due to societal changes that greatly influence the performance of filial behaviors.

Factors Influencing Family Members in Fulfilling the Filial Responsibility Role

Several factors have been documented to influence filial responsibility roles of adult children. These factors are discussed below.

Family structural variables

The family structural variables that will be discussed are birth order of children, gender and gender network, and marital status, employment status, and geographic proximity of adult-children. These variables have been shown to have impacted on the caregiving behaviors of adult children.

Birth order of children

There has been an inconsistent relationship reported between birth order and filial behaviors. Houser, Berkman, and Bardsley (1985) did not find birth-order differences in the provision of filial care. Similarly, Wake and Sporakowski (1972) found no difference in birth order regarding the willingness to support aged parents; but, when gender of the child was controlled, birth order differences emerged. Among females, the oldest and the intermediate sibling were less willing to support aging parents than was the youngest sibling. Among male children, the birth order showed no difference. In contrast, Lopata (1973) found consistent birth-order differences in helping widowed parents across gender of the adult child. In her widowhood study, she found that the youngest child of both genders was least helpful to parents.

Gender and gender network of children

In contrast to birth order, gender differences were evidenced in most studies on filial responsibility. Daughters were reported to perform more caretaking activities than sons (Abel, 1990; Houser et al., 1985; Horowitz, 1985; Seelbach, 1977, 1978; Seelbach & Sauer, 1974; Spritze & Logan, 1990a, 1990b). Coward and Dwyer (1990), using two national data sets, reported that daughters were three times more likely to be primary caregivers than sons. Compared to sons, a much

higher proportion of available daughters were providing care to impaired elderly parents. The highest rate of caregiving occurred among only children.

Similarly, in a mixed gender network, daughters more than sons were apt to be primary caregivers. However, among children in a single gender networks, the difference between sons and daughters was not statistically significant, though more daughters than sons were primary caregivers (Coward & Dwyer, 1990).

Male caregivers who were involved in caregiving tended to have androgynous characteristics. They were committed and had experiences similar to those of their female counterparts in caregiving activities (Kaye & Applegate, 1990).

Gender differences are seen in the types of activities performed by adult offspring. Horowitz (1985) indicated that daughters provided on-hand services such as transportation, household chores, meal preparation, and personal care. Sons were more involved in giving advice, and in performing household repairs and yard work. When tasks were less gender-specific or tended to be male-oriented, sons did not differ from daughters in providing such services.

Similarly, Houser et al. (1985) indicated that daughters performed more caretaking activities/social services and provided more emotional support to their mothers than did sons. Sons provided more advising assistance to their

mothers. Financial support did not differ between sons and daughters. Further, Dwyer and Coward (1991), using a multivariate analysis to compare involvement of sons and daughters in the care of impaired elderly, reaffirmed the gender difference in caregiving. They reported that sons were more involved in instrumental daily living tasks, while daughters were more involved in activities of daily living.

Gender composition of offspring also affected parental care. Matthews (1987), in an exploratory division-of-responsibility study, reported that families who had two adult daughters shared equally in providing advice, personal services, and emotional or moral support to their elderly parents. On the other hand, families that include four or more siblings, a higher proportion than in either triadic or dyadic sibling structures, report providing "mixed" help or help "not at all" to aged parents.

One would expect that, in families with one or two siblings, parent care has to be undertaken by either one sibling or the other. On the other hand, with more than two siblings the chances of undertaking the role by any one sibling would be contingent on situations. In fact, in a qualitative analysis of sibling network on parental care, Matthews and Rosner (1988) identified five typologies of style in parental care. The typologies were based on predictability of help and the availability of siblings. They reported that

the routine or backup style was common among daughters, while sons were more likely to be the sporadic or dissociate caregivers. Sporadic caregivers provided services at their own convenience, while the dissociate caregivers could not be counted on to assist parents. Although the data were based on an N of only 55, the findings have implications in terms of the mechanisms used by siblings to carry out their filial duties. Further, Finch and Mason (1990b) emphasized that family members may use the quality of relationships between parent and children as an important procedural rule in negotiations about filial obligations.

Marital and employment status of children

Being married and employed are two roles of adult children that have implications for affecting the manifestation of filial behaviors in adult children. Cicirelli (1983) found that offspring who were divorced provided less assistance to parents than did offspring who were married. In addition, marital status has both a direct effect, and an indirect effect through attachment behaviors, to giving future help to elderly parents (Cicirreli, 1984). Daughters who were married contributed an average of 20.1 fewer hours per month than did daughters who were not married (Stoller, 1983).

Further, daughters who were widowed, separated, or divorced provided three times more help than did married

daughters. Among sons, being married reduced the average level of assistance by 23.3 hours. Number of children regardless of age did not have a significant effect on the number of hours of help that were provided by daughters. Among sons, the number of children under six affected the level of assistance (Stoller, 1983).

Further, Rossi and Rossi (1990) reported that the strengths of an individual's kinship obligation depend on the individual's early childhood experiences. Those who grew up in intact homes showed higher levels of obligations to kin than those whose families of orientation were broken by death, divorce, or separation.

The issues of support are complicated if the divorced individuals remarry. Finch and Mason (1990a) indicated that in cases of reconstituted families, the history of good interpersonal relationships before divorce is the key element in understanding why some people sustained close and supportive relationships, cut off contact completely, or remained friendly but did not expect to offer each other support after divorce. As the family structure becomes more complicated the issues of family boundary, responsibilities, and loyalties are salient for these families.

With women's involvement in the work force, one would expect that caregiving will be affected. Yet, Brody and Schoonover (1986) found no significant difference in the

number of hours of help that were provided to the parents by employed and non-employed daughters. Mothers of employed daughters received slightly fewer hours in certain tasks but received more hired help. Thus being employed allowed caregivers to pay for the help that would otherwise be provided by them if they had the time. In contrast, Lang and Brody (1983) indicated that working women provided fewer hours of help than did non-working women.

Regardless, parental care had made employed daughters miss work, caused work interruptions, and made them lose their pay. Parent care also robbed daughters of their energy, limited job opportunities, and made them wish they did not work (Brody et al., 1987; Scharlach & Boyd, 1989). The helper's employment status had a significant effect for both sons and daughters in helping their parents (Stoller, 1983).

Geographical proximity

The helping relationships of adult children toward aging parents are related to the geographical proximity of adult children to elderly parents. Proximity influenced the opportunities and the kind of services that can be provided by the children. Leigh (1982) concurred that geographical distance reduced the amount of interaction among kin.

Besides, geographical distance influenced the quality of parent-child relationships. Mercier, Paulson, and Morris (1989) indicated that geographical distance affected the

quality of the intergenerational relationship. Educated older parents who lived within 60 miles from their children had a higher quality of relationship with their children than did more distant parents. For distant parents, the number of children contributed significantly to the quality of the relationship.

Living with adult children is not the norm in American society. A third of the aged in 1952 lived with children, and a sixth live with children (Schorr, 1980). Middle-aged daughters who lived with their mothers provided eight times more help than did those who lived separately (Lang & Brody, 1983). Lee, Dwyer, and Coward (1990) indicated that older residents of large cities were more likely to live with children, while rural nonfarm elderly were least likely to live with children.

Children who lived a long distance from their mothers had less sense of obligation. For male children, distance was the only significant variable with respect to care for mothers (Finley, Roberts & Banahan, 1988).

Furthermore, physical distance influences the kind of interaction and types of support that can be provided to the aged parents. In a review article, Moss, Moss, and Moles (1985) found that distance influenced the frequency of visiting and face-to-face contact. Similarly, DeWit, Wister, and Burch (1988) showed that physical distance influenced the

styles of social contact. In a nonlinear pattern of contact across distance, physical distance added 15% to the explained variance in contact type and was the strongest predictor.

Litwak and Kulis (1987) reported that distance modified the kind of assistance that can be procured by kin.

Matthews (1987) was surprised to find that, among her sample, distance affected the provision of emotional support. Provisions of emotional support can be carried out without being physically present, yet her research indicated otherwise. In contrast, Kulis (1987) found that proximity exerted an enormous influence on visiting and household help, but was an insignificant contributor to feelings and perceptions children and parents had toward one another.

Schoonover, Brody, Hoffman, and Kleban (1988) studied the situations of parent care by long-distance children. They found that, despite living far away, both sons and daughters reported emotional strains and worries, as well as disruptions to their life, deriving from their mothers' health situations. In terms of specific help provided, close to 90% contributed less than ten dollars per month to their mothers' living expenses and care. Forty percent of respondents reported visiting their mothers several times a year, 38% visited once a year, and 11% saw the mother once or twice a month.

Characteristics of parents

Gender

Filial obligations to mothers and fathers are performed differently by adult children. Finley et al. (1988) reported gender differences in filial obligation to parents. For fathers, factors such as education, affection, and role conflict were significant predictors for female children's filial performance. Education had a negative effect on filial obligation for female children. For sons, number of siblings influenced filial obligation to fathers.

Marital status

In addition to gender of a parent, marital status of parents also influenced the amount of help received from children. Widowed or unmarried parents were more likely than the married parents to receive higher levels of filial support (Seelbach, 1978). Similarly, Marshall, Rosenthal, and Daciuk (1987) reported that married respondents were less likely than widows to receive help from children.

Health status

Further, the health status of the parents may be the precursor to the help received by the parents. Walker and Pratt (1991) demonstrated that mothers' health status determined the level of assistance they will receive from their daughters. Daughters of dependent mothers provided help for activities such as shopping and errands, indoor tasks, and

meal preparation. This finding was similar to that of Stone, Cafferata, and Sangl (1987) in their national profile of frail elderly research results. Daughters of independent or self-sufficient mothers did not provide any of the help mentioned above (Walker & Pratt, 1991). In contrast, Hamon (1992) reported that male offspring performed larger numbers of filial behaviors than female offspring when the parent's health was poor.

Age

The health status of the aged parents is confounded by the age of the parents. The mean age of dependent mothers was 81 years old, and the mean age of the independent aged parent was approximately 75 years old (Walker & Pratt, 1991). Using a Canadian sample, Marshall et al. (1987) contended that older respondents, aged 80 and older, received more help than respondents in the lower-aged categories. As expected, the older one gets, the more likely one is to be afflicted with more health problems.

Incomes

Additionally, household income of older respondents may influence the help received from children. Marshall et al. (1987) indicated that older respondents who had high incomes did not receive much help compared to lower-income respondents.

Attitudes, expectations, motivations, and preferences

Hamon and Blieszner (1990) reported that both adult children and parents endorsed certain filial responsibilities of adult offspring to parents. The authors suggested the filial responsibility items endorsed by parent-child pairs seemed to reflect the current trends in American families. The study found emotional support by adult children to be important to aging parents. Both parents and children reported living close, frequent writing, and visiting as less important than emotional support. The parents felt secure in their belief that they can depend on their children when needed.

Generational differences in attitudes of filial responsibility were also elucidated by Seelbach (1978). Older generations expected more from their offspring in the way of filial aid and support. Brody et al. (1984) studied the opinions and preferences of three generations of women on filial responsibility. They reported more than 80% of the three generations considered it to be the responsibility of the adult children to help meet expenses of professional care for their widowed mothers. The majority of oldest and middle-generation women did not endorse intergenerational living arrangements. The oldest generations preferred to live near their adult children. Adjusting one's work schedule was not generally seen as appropriate, but adjusting family schedules

was seen as appropriate. However, the oldest generation of women expected working, married daughters to adjust, more so than working nonmarried daughters. All generations expected working daughters more than working sons to adjust their family schedules.

Differences in attitudes of filial responsibility between male and female offspring were also noted in the literature. Both male and female children felt obligated to care for their elderly parents (Finley et al., 1988; Finley, 1989; Spritze & Logan, 1990b). Yet, the actual behavior performances were different. Spritze and Logan (1990b) evidenced low actual performance of filial behavior among male children, and Finley (1989) reported that male offspring did not fulfill the responsibility to the extent that female offspring did.

Caregiving motives were examined by Walker, Pratt, Shin, and Jones (1990). They indicated that elderly mothers and adult daughters believed that caregiving was done for discretionary reasons. These attitudes seem to be consistent with what Hess and Waring proposed in 1978, where they warned of a move in contemporary families to view responsibilities as voluntary rather than as obligations. In addition, Aldous (1987) contended that the young-old mothers, like their children, were keeping their intergenerational ties voluntary rather than obligatory.

Filial Responsibility in the Malaysian Context

Minimal research has been conducted on filial responsibility in Malaysia. This lack of research interest may be due to the recency of the phenomenon of population aging, or it may be that studies will elucidate issues counter to the expected norms in the culture. Aspects of filial responsibility that will be described below include: (i) reciprocal help between elderly and kin, inclusive of financial help, caregiving, and filial expectation, (ii) visitation pattern, and (iii) living arrangement.

Reciprocal help between elderly and kin

Early information on filial responsibility in Malaysia can be traced to the exploratory study by an anthropologist, Strange (1980). She conducted her investigation in three villages in the state of Terengganu between January and June, 1979. Mutual exchanges between close kin occurred so frequently that they became part of the generalized reciprocity system and tended to be taken for granted. For example, food exchanges occurred so frequently that when asked about these exchanges, the respondents did not report them (Strange, 1980). An elderly person got general help and money from their children, and the children were concerned about the elderly person's health. The elders provided money, helped in the care of grandchildren, assisted in family gatherings

(Strange, 1980), looked after the house, prepared simple food, and provided both religious and other education (ESCAP, 1989).

Financial support to elderly persons is a common practice among Malaysians, and it has become part of the custom. This practice is encouraged, as Malaysia does not have a comprehensive old-age pension system. Masitah and Nazileh (1986) reported that 73% of elderly males and 90% of elderly females aged 55 and over depended on monetary or material support from children/grandchildren. Similarly, the ESCAP study reported that the main source of financial support was from children (55%). The pattern of financial dependency is different for male and female elderly. Female elderly depended more on their children, while male elderly depended on their spouses (ESCAP, 1989; Masitah & Nazileh, 1986).

Gender difference in types of care provided by primary care providers were also evident. Seventy-one percent of male carers rendered only financial support, while 73% of female carers provided only physical support (ESCAP, 1989). The source of financial support seems to contradict what was reported by Strange (1980), where daughters were more frequent financial givers than were sons.

Strange (1980) reported that elderly who were recently sick were taken care of at home by the wife, children, grandchildren, or a combination of these persons. A comparable result was reported by Masitah and Nazileh (1986),

where persons who helped the most when the elderly were ill were their spouses (33%) and their children (31%). These findings indicated the significant role of family members in the helping network of the elderly persons.

Further, when the elderly were asked who was the best provider of support in old age, 89% of elderly women and 76% of aged men replied that children are the best providers of support. In fact, 81% of the resident primary care providers in the ESCAP study indicated that they expected their children to take care of them during their old age (ESCAP, 1989). Twenty-six percent of male resident primary caregivers and 21% of female primary caregivers mentioned the eldest son as the person who would be responsible for taking care of them in old age. Notably, only 14% of female resident caregivers mentioned their daughters as caregivers, and just 5% of male primary caregivers mentioned daughters as future carers.

Data on the current practice of filial care in Malaysia indicate that 35% of elderly depended upon their spouses as care providers. A higher percentage of male elderly (57%) than female elderly (16%) depended on their spouses for care. Female elderly, on the other hand, relied more on own children than did men (34% and 21%, respectively) for care, while 23% of aged females, compared to 11% of aged males, claimed that they had nobody to care for them (ESCAP, 1989).

In the ESCAP study the primary care providers were asked the main reasons why they were involved in caregiving activities. Fifty percent of the care providers cited duty toward elderly as a major reason they became the primary care providers. Forty percent cited caring for his or her spouse; emotional satisfaction and being the only relative jointly contributed to the other 10%. Fifty-nine per cent of the rural sample mentioned this reason, compared to 48% of the urban sample. Forty-six percent of male caregivers cited this reason, compared to 52% of female care providers.

In terms of health status, more than 70% of the elderly responded positively to the question of reported health status. Fifty-three percent of elderly aged 80 years or more reported they were quite healthy (Andrews, Esterman, Braunack-Mayer, & Rungie, 1986). In the socioeconomic consequences survey, 67% of the respondents aged 60 and over reported they were in good health, and only 6% reported having poor health (Masitah & Nazileh, 1986).

Visitation pattern

Children often visited their parents, and those living furthest away visited the least (Strange, 1980). The frequency of visitation pattern was described in more detail in the socioeconomic consequences survey (Masitah & Nazileh, 1986). Twenty-six percent of children visited their parents

infrequently, 23% of adult children visited monthly, 18% visited weekly, and 16% visited every day. On the other hand, 46% of the elderly made infrequent visits to their children, 14% either hardly ever visited or made monthly visits, 7% made weekly visits, and 9% visited every day.

Long-distance living arrangement may be the reason for the infrequent visitation between the adult children and their parents (Strange, 1980). Further, Masitah and Nazileh (1986) alluded to it in their explanation of the visitation pattern. However, geographical proximity was not measured in the 1986 survey.

Living arrangement

Living with other family members is an accepted living arrangement or norm for elderly and the population as a whole. Approximately 40% of the elderly lived in an extended family, and 47% lived in a vertically extended family which consisted of head of household, spouse, children, grandchildren, sons/daughters, son/daughter in-law, and grandparents (Masitah & Nazileh, 1986).

In terms of living arrangement, for the males aged 55 years and over, almost 69% of them lived with their spouse and other family members, compared to 32% of the females in the same age group (Masitah & Nazileh, 1986). Living alone as a preference occurred to less than 4% of elderly males, compared

to 7% of aged females. Further, 16% of elderly males, compared to 9% of elderly females, gave the situation of children living far away as the main reason they live alone.

Almost 8% of elderly Malays, a large percentage compared to other ethnic groups (3% for both Chinese and Indians), lived alone (Masitah & Nazileh, 1986). The rural-urban migration of the Malays may contribute to the high percentage of the elderly living alone. The Malay migrants were proportionately higher (7%), while the Chinese were lower, than in the general population (Dept. Statistics, 1988). In addition, the probability of living alone increased when there were fewer children (Masitah & Nazileh, 1986).

From the information presented, it seems that the elderly are still an integral part of the family. Nevertheless, the data also demonstrate changes in family life in Malaysia which might impinge on the normative expectation of care and support of parents. As Strange (1987) remarked:

Support of the destitute parents is required both by custom and Muslim law and is characteristic of Malay society from Southern Thailand to Singapore. Ideally, adult children are expected to give money, food, clothing, or other gifts to parents of any age if they have financial wherewithal, irrespective of parental need (pg. 24).

In summary, the empirical studies on filial responsibility in Malaysia highlighted the filial activities conducted by family members for the elderly members of the family. But the form and content of filial responsibility

that have been investigated were narrow. Although these studies were limited in scope, the issues that were brought forth seem to emerge in circumstances similar to the situation in the United States.

Theoretical Model of the Study

Based on the review of previous research, two theoretical models are developed for the present study. Figure 1 represents the theoretical model and the proposed relationships among the variables for aged parents. The theoretical model and the proposed relationships among the variables for the adult children are shown in Figure 2.

Theoretical Basis of the Study

The literature reviewed earlier indicates complexities involved in filial responsibility performance by family members. Several approaches have been developed to explain the underpinnings of intergenerational relationships. For this study, attachment and obligation perspectives are adopted.

Attachment in adulthood is complex. Cicirelli (1991) suggests that attachment in adulthood took the form of symbolic attachment, where the individual formulates a mental presentation of the attached figure and achieves feelings of

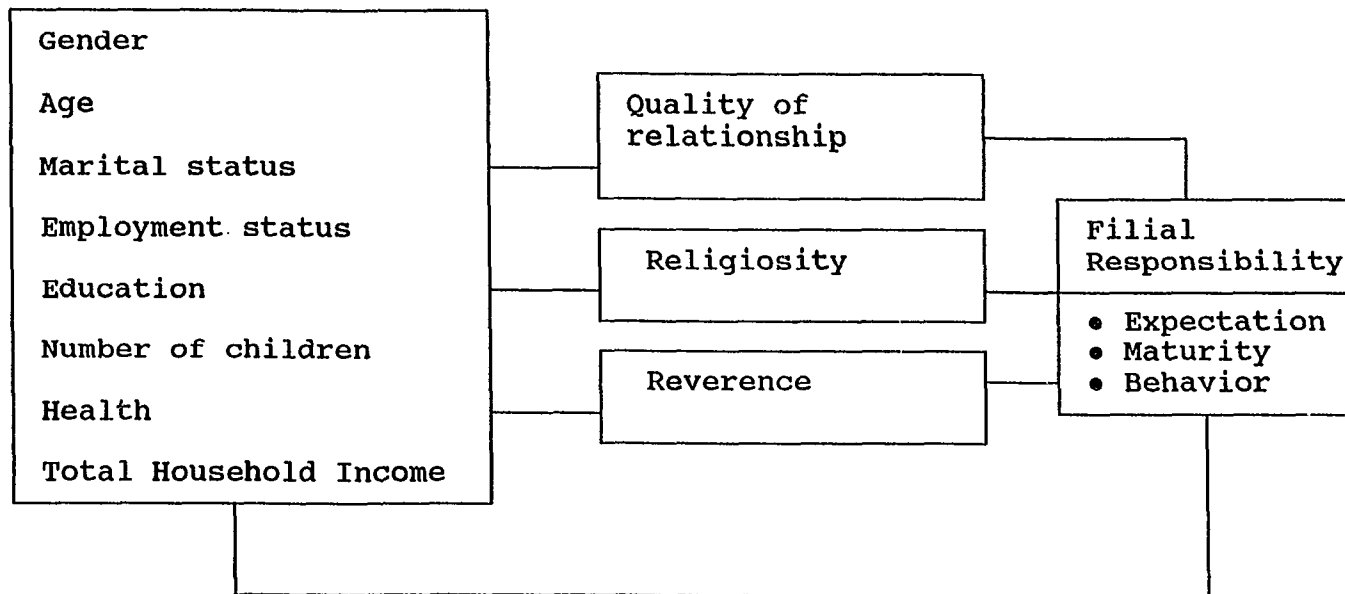


Figure 1. Parents' theoretical model and the proposed relationships between exogenous and endogenous variables

psychological closeness and security when considering this symbolic representation" (pg. 30).

As mentioned earlier, the manifestation of filial obligation depends on the intergenerational relationship and context in which it takes place. Therefore, in the present study the context in which filial responsibility is performed is expressed in terms of Islamic teaching and Malay culture. The teachings of the Koran are the guiding principles in the everyday life of Malay families. One of the duties of children toward parents is "ihsan," which connotes kindness, compassion, reverence, charity, and conscientiousness (Abd al Ati, 1977). Moreover, it is a religious duty as well as a virtue for children to show "ihsan" to parents. Further, the Malaysian society sanctions this behavior. Reverence to elders and filial obligation to the parents is expected from children.

Hence, as suggested by Thompson (1989), contextual and relational morality may play a part in explaining filial responsibility in Malaysia. Subsequently, Cicirelli (1991) noted that "adult children's help to elderly parents is universally motivated by attachment and simultaneously by cultural conditioning regarding a sense of equity and/or obligation" (pg. 36).

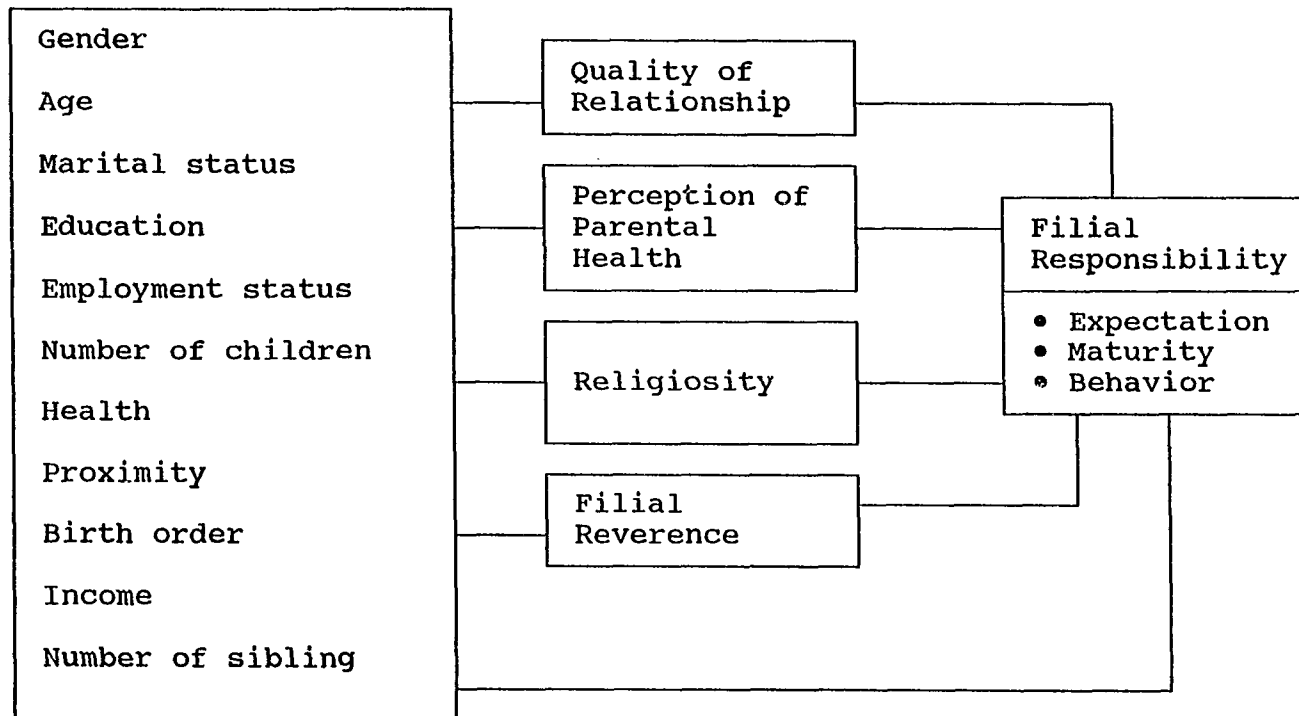


Figure 2. Adult children's theoretical model and the proposed relationships between exogenous and endogenous variables

CHAPTER 3. METHODS

The methods chapter describes the research process adopted in this study. The discussion will encompass: (i) sampling techniques, (ii) data collection, (iii) data analysis, (iv) measurement and instrumentation, (v) and computation of the exogenous and the endogenous variables.

Sampling Techniques

The population of interest was the Malay parents aged 50 and above living in the subdistrict of Beranang, Selangor at the time of the survey. This state is the home base of the researcher, which means that the population was easily accessible to the researcher. Moreover, the population was familiar with people from Universiti Pertanian, as the subdistrict was one of the field locations for extension services of the university. Hence, rapport with the elderly respondents was easily established.

Before the field work was conducted, a meeting with the head of the subdistrict and the village heads was convened. This meeting was thought necessary and considered important for explaining the study to the leaders, to gain their consent and cooperation, and to encourage them to announce the study to the villagers.

There was no systematic and complete list of households with elderly members available in the subdistrict to draw on for some kind of random sample selection. Thus, purposive sampling procedures were adopted to select the participants for the study. The village heads provided several names of people aged 50 and above living in the village. This formed the initial list of participants, and from there the respondents cooperated and identified others in the village that were 50 years or older. Figure 3 shows the location of the study.

A modified consent form (Appendix B) was read to each potential respondent explaining the purpose of the study and the time needed for the interview. All healthy parents 50 years of age or older were included in the study.

The respondents were contacted four times to try to complete each interview and a date line of May 20th, 1992 was set to determine closure of attempts to interview the participants. If the respondents were not present at the appointed time, and could not be contacted or showed evidence of unwillingness to participate by the date line, they were not included in the study.

For the elderly parents, 205 were contacted but seven of the respondents either did not have children living close to them or had children as coresidents. Thus, they did not meet the eligibility requirement, which was that the elderly

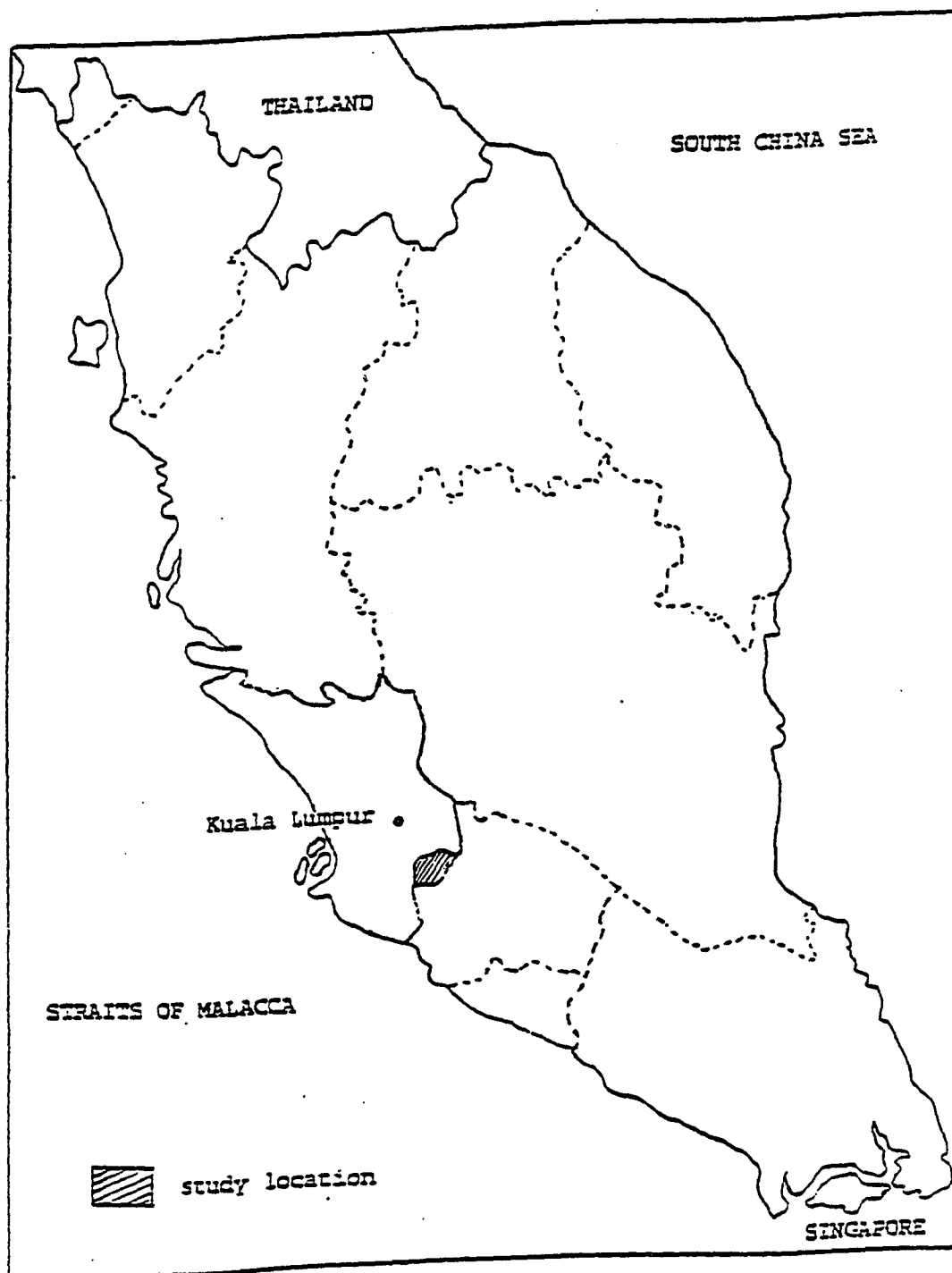


Figure 3. Map of Peninsular Malaysia showing the study location

parents had children living close to them but not as coresidents. Therefore, only 198 parents were included in the study.

The total adult children sample ideally would be 198, but only 188 were included in the study. Ten adult children either were not able to be contacted, refused to participate, or were absent at the appointed date of the interviews. The noninterview rate for the adult children sample was 5%.

Data Collection

The data collection was conducted by personal interview of the respondents in Bahasa Malaysia. Five interviewers, plus the researcher, interviewed the parents in their homes. For the adult children, the interview locations were varied: either at their homes, their parents' home, or at their place of work.

The five interviewers who assisted in the study were selected from a list of enumerators who have worked with the Department of Human Development Studies previously as interviewers and who were recommended by the faculty members of the department.

The interviewers were trained for two days in the use of the interview form and the procedures that should be followed when interviewing the respondents. The importance of waiting for responses and not providing answers for the respondents

was stressed. They were also trained to pay particular attention when interviewing the elderly respondents. For the elderly respondents, they were asked to slow down and pace the interview.

The researcher accompanied the interviewers during the initial part of the study, to observe the way the interviews were conducted and to ascertain the quality of the data collected. The average length of interviews for the parents was 30-45 minutes, and for the adult children, the average time taken was 20-30 minutes.

The finished questionnaires were checked for completeness of information by the researcher, and the interviewers were asked to verify missing information or incomplete answers. The checking process was conducted every week by the researcher.

Data Analysis

The data were coded in Dbase IV format for subsequent analysis. The Statistical Package for the Social Sciences-X Land LISREL 7 (Joreskog & Sorbom, 1989) package were used to analyze the data.

Descriptive statistics, correlations, and LISREL analyses were used to determine the predictors of filial responsibility. LISREL analysis was adopted because LISREL is

a powerful tool that enables one to analyze simultaneous relationships among variables of interest.

Further, LISREL allows for measurement errors in observed variables, random measurement errors, the interrelationships of measurement errors between indicators, and multiple indicators of concepts, and also allows one to analyze relationships involving latent variables unobscured by measurement errors (Bollen, 1989). Consequently, multiple regressions or path analyses were not utilized in testing the models in the study, as these programs assume that the variables in a theoretical model were directly observed and measured without error (Lavee, 1988).

The LISREL model consists of two parts: the measurement model and the structural model. The measurement model specifies how latent variables or hypothetical constructs are measured in terms of the observed variables and is used to describe the measurement properties (validities and reliabilities) of the observed variables.

The structural equation model specifies the causal relationships among the latent variables, and is used to describe the causal effects and the amount of unexplained variance (Joreskog & Sorbom, 1986). Each equation in the model represents a causal link rather than mere empirical associations. The structural parameters do not, in general,

coincide with coefficients of regressions among observed variables (Joreskog & Sorbom, 1986).

In LISREL analysis, the investigator is interested in minimizing the difference between the sample covariances and the population covariances of the predicted model (Bollen, 1989). The fundamental hypothesis of structural equation procedures is that the covariance matrix of the observed variables is a function of a set of parameters. If the model is correct and if the parameters are known, the population covariance matrix can be exactly reproduced (Bollen, 1989).

Several steps are involved in structural equation models, i.e., model specification, identification, estimation, and assessment of goodness of fit of the sample covariance and the population covariances. In this study, emphasis was placed on evaluating models' goodness of fit.

The data for the study were analyzed separately for the parents' generation and the children's generation. This decision was made because this research was trying to test the theoretical model separately for parents and adult children. Furthermore, Schaie (1984) indicated the importance of considering period and cohort effects in generational research. For these reasons, separate analyses for parents and adult children were employed.

Measurement and Instrumentation

Based on previous studies and on Islamic literature, interview forms were developed by the investigator to provide information on the socio-demographic variables; health status and social activities; filial responsibility; and the filial reverence items. The dependent variable, filial responsibility, was defined as the personal sentiments of obligation of adult children to meet the needs of aged parents.

This construct has three dimensions: filial expectations, filial behaviors, and filial maturity. Filial expectation measures the attitudes that typically are thought of as filial responsibility (i.e., helping when sick, visiting, emotional support) and items that tapped emotive, instrumental, contact, and communicative components of filial responsibility. This instrument was a modified version of the Hamon Filial Responsibility scale (1988). The instrument was measured on a three-point Likert range, coded from (1) "disagree," (2) "not sure," and (3) "agree."

The filial behavior concept measures the actual activities the adult children experience with their parents. The types of activities include instrumental help, emotional support, transportation, financial support, visitation patterns, gifts, and grandparenting. The filial behaviors were measured in terms of frequencies of help given by adult

children and received by aged parents. The items were open-ended and the respondents were required to provide the frequencies of their behaviors. These frequencies were later coded on a nine-point scale with values of "never," "once a year," "2-4 times a year," "5-11 times a year," "once a month," "2-3 times a month," "once a week," "every day," and "when needed," and "not relevant."

Filial maturity was defined as the feeling of being able to depend on parents and adult children in time of need and the parents' and adult children's ability to provide for each other. This concept was measured on a three-point Likert scale, with responses of "disagree," "not sure," and "agree."

The filial reverence measure was created based on the general precepts of parent-child relationships established in the Koran and the Hadith. This measurement is culturally specific. Twelve statements were developed, and the responses to each were coded "no" and "yes."

Quality of the relationship between adult children and aged parents was evaluated using the four statements developed by Bengtson and Schrader (1982). The four statements were: "How much does the child trust the parent?" "How much does the child care about the parent?" "How much does parent trust the child?" and "How much parent cares about child?" The response categories were "not at all," "a little," "somewhat," "quite a bit," and "a great deal." The respondents also rated

the overall relationship with their parents or children. The response categories were "very poor," "poor," "fair," "good," and "very good."

Perception of health status was a global measurement of health condition. The respondents were requested to evaluate whether their health condition was a cause of worry. The question was phrased as, "has your overall health caused you a great deal of worry, some worry, no worry at all, or don't know?" In addition, the adult children were asked to rate their parents' health status. This question was phrased as, "How would you rate your parent's health?" The responses included "poor," "fair," "good," and "very good."

Religiosity was a frequency measure of the respondents' attendance at religious lectures. The frequency responses were "never," "once a year," "2-4 times year," "5-11 times a year," "once a month," "2-3 times a month," "once a week," and "every day."

The family structural variables were descriptive measures of the parents' and adult children's family situations. For the adult children, questions concerning marital status, number of children in the household, number of siblings, birth order, gender, employment status, household income, education, and proximity to parents were developed as indicators of family structural condition. Information for the parents was less detailed, including information on gender, age, marital

status, number of living children, employment status, education, household income, and health status.

The instruments were developed separately for parents and adult children. The interview forms were reviewed by six faculty members in the Department of Human Development Studies at Universiti Pertanian Malaysia. The expert reviewers were requested to study the items for clarity, appropriateness, and accuracy.

The separate interview forms were revised several times and translated to Bahasa Malaysia. Pilot testing of the interview form was conducted on five respondents with backgrounds similar to those of the prospective participants. The information from the interviews was studied, and necessary revisions and modifications were made to the interview forms before the final instruments were produced (Appendix A). The instruments and methodology of the study were approved by the Human Subjects Review Committee at Iowa State University.

Computations of the Exogenous and Endogenous Variables

The creation of the variables in the theoretical models are described in this section of the report.

Gender. Gender was coded as a dummy variable, 0 being female and 1 being male.

Age. Age of the respondents was a continuous measurement in terms of the number of years old the respondents were at the time of the interview.

Marital status. This variable was recoded into a dummy variable. Zero signified "not married," and 1 was "married."

Employment status. Employment status of the parents was coded 0 for unemployed and 1 for employed. Employment status for the adult children was recoded to a dichotomous dummy variable for comparison between the parent and child models.

Education status. Education status for the parent was coded as a dichotomous dummy variable, 0=did not attend school and 1=attended school for the parents. For the adult children this variable was a continuous indicator of the number of years of school attendance.

Number of children. Number of children was a continuous variable that measured the actual number of children the respondents had at the time of the interview.

Number of siblings. Number of siblings was the actual number of siblings the adult children had at the time the study was conducted. This information was not solicited from the parents.

Birth order. Birth order of the adult children was coded in terms of the actual position they held in their sibling network. The categories were "only child," "first child," "second child," "third child," "fourth child," "fifth child,"

"sixth child," "seventh child," "youngest," and "eight or more." The "youngest" category was recoded to the median and the children that occupied fifth or more birth-order positions were recoded to "fifth and more" category.

Proximity. Proximity was measured as a continuous variable that measures the actual distance in kilometers of the adult children's residents from their elderly parents.

Health status. Health was measured by asking the respondents, "has your overall health caused you a great deal of worry, some worry, no worry, or don't know?" The responses were coded on a four-point scale ranging from 1="don't know" to 4="a great deal of worry." The overall health variable was recoded into 1="no worry," 2="don't know," 3="some worry," and 4="a great deal of worry." Similarly, the perception of parents' health was a categorical variable with responses ranging from 1="poor" to 4="very good."

Household income. Estimated total household income was derived from two kinds of information: the amount of income from 13 sources and the frequency with which income was derived from the 13 sources. The frequency of receiving money from the specific sources of income, whether weekly, monthly, etc., had to be recomputed as annual income for 1991. Thus, the amount of income from each source was multiplied by the number of times the income was received from that source for 1991.

An illustration of the computation of household income follows. The calculation assumes that the source of income was from a nonresident adult child and that the number of times the elderly parents received money from this source was "never," "once a year," "2 times a year," "per season," "3-11 times a year," "once a month," "2-3 times a month," and "once a week." The total income from a nonresident child for the year was calculated as follows:

$$\begin{aligned} &\text{amount} \times 0 \text{ (never)} + \text{amount} \times 1 \text{ (once a year)} + \text{amount} \times 2 \\ &\text{(twice a year)} + \text{amount} \times 2 \text{ (per season)} + \text{amount} \times 7 \\ &\text{(for 3-11 times a year)} + \text{amount} \times 2.5 \times 12 \text{ (2-3 times a} \\ &\text{month)} + \text{amount} \times 12 \text{ (once a month)} + \text{amount} \times 52 \text{ (weekly)} \end{aligned}$$

The same procedures were followed for each source of income, and the summations from the amount and sources made up the total household income for both the adult children and parent respondents.

Quality of relationship. An affection scale was created based on the four statements about care and trust between parents and adult children. Tables 1 and 2 show the distribution of parents' and adult children's relationship quality.

Factor and reliability analyses were conducted in the creation of this scale. The value of Cronbach's alpha for the parent affection scale was .87, and for the adult children it was .82. The affection scale scores range from 1 to 12 for parents, with standard deviation of 2.098. For adult

Table 1. Parents' perception of the quality of parent-child relationships

Quality of relationship indicators	N	%
How much child trust you?		
Not at all	3	1.5
A little	23	11.6
Somewhat	109	55.1
Quite a bit	63	31.8
How much child cares about you?		
Not at all	3	.5
A little	9	4.5
Somewhat	121	61.1
Quite a bit	65	32.8
How much respondent trusts child?		
Not at all	2	1.0
A little	12	6.1
Somewhat	113	57.1
Quite a bit	71	35.9
How much respondent cares about child?		
Not at all	1	.5
A little	4	2.0
Somewhat	118	59.6
Quite a bit	75	37.0
Overall quality of relationship		
Very poor	2	1.0
Poor	1	.5
Fair	7	3.5
Good	122	61.6
Very good	66	33.3

Table 2. Adult children's perception of the quality of parent-child relationships

Quality of relationship indicators	N	%
How much parent trust you?		
Not at all	-	-
A little	25	13.3
Somewhat	108	57.4
Quite a bit	55	29.3
How much parent cares about you?		
Not at all	-	-
A little	19	10.1
Somewhat	98	52.1
Quite a bit	71	37.8
How much child trusts parent?		
Not at all	-	-
A little	4	2.1
Somewhat	98	52.1
Quite a bit	86	45.7
How much child cares about parent?		
Not at all	-	-
A little	8	4.2
Somewhat	103	54.8
Quite a bit	77	41.0
Overall quality of relationship		
Very poor	2	1.1
Poor	1	.5
Fair	6	3.2
Good	122	64.9
Very good	57	30.3

children, the scores range from 4 to 12, and the standard deviation was 1.987.

Another indicator of relationship quality was the rating of overall relationship between parents and adult children. The responses were coded on a five-point scale, from 1 being very poor to 5 being very good. Close to 65% of the children reported they had good relationships with their parents, and 62% of the parents indicated they had good relationships with their adult children.

Religiosity. The religiosity measure was assessed by asking respondents to give the frequency with which they attended religious lectures in the last year. This variable was recoded later into a dichotomous variable, 0 for those who did not attend and 1 for those who attended. Table 3 gives the distributions of attendance at religious lectures of parents and adult children.

Filial reverence. The degree of filial reverence was measured by statements about parent-child interaction based on the Koran and Hadith. Tables 4 and 5 show the responses to the statements. The responses to the statements were coded "yes" and "no." Statement number six in Tables 4 and 5, "obedience to one's father takes precedence over one's mother," was recoded. This statement was opposite to the teachings of the Koran. Similarly, statement number eleven in Table 4 was recoded. The responses to the statements were

Table 3. Frequency of parents' and adult children's attendance at religious lectures

Frequencies	Parents		Adult children	
	N	%	N	%
Never	182	91.9	177	94.1
2-4 times a year	1	.5	-	-
5-11 times a year	2	1.0	1	.5
Once a month	-	-	1	.5
2-3 times a month	5	2.5	2	1.1
Once a week	8	4.0	6	3.2
Every day	-	-	1	.5

summed up to be a reverence score. The high scores indicate higher reverence. The parents' scores range from 5 to 12, with a mean of 11.5 and a standard deviation of 1.13; 66% had a score of 12. The children's scores ranged from 8 to 12, with a mean of 11.7 and standard deviation of .5. Approximately 76% of adult children had the highest possible score of twelve.

Filial expectation. The filial expectation scale was created from the statements about filial expectations. Appendix C shows the frequency distribution of the responses to the items for the parents and adult children. Exploratory

Table 4. Distribution of parents' filial reverence

Statements	Responses			
	No		Yes	
	N	%	N	%
1. Children should obey parents' wishes, except those against religious teachings	1	.5	197	99.5
2. Children should not cause harm to parents	3	1.5	195	98.5
3. Children should be ready to help parents	7	3.5	191	96.5
4. Parent should not cause harm to children	2	1.0	196	99.0
5. Children should pray for parents' health and well-being even if they are dead	4	2.0	194	98.0
6. Obedience to one's father takes precedence over one's mother	145	73.2	53	26.8
7. Children should not belittle their parents	2	1.0	196	99.0
8. Children should not say bad things about their parents	2	1.0	196	99.0
9. It is sinful to mistreat your parents	2	1.0	196	99.0
10. Children should show respect and courtesy when interacting with parents	3	1.5	195	98.5
11. Children should talk back and raise their voices to their parents	189	95.5	9	4.5
12. Children should assist their parents financially if needed	8	4.0	190	96.0

Table 5. Distribution of adult children's filial reverence

Statements	Responses			
	No		Yes	
	N	%	N	%
1. Children should obey parents' wishes, except those against religious teachings	5	2.5	183	97.3
2. Children should not cause harm to parents	2	1.1	186	98.9
3. Children should be ready to help parents	3	1.6	185	98.4
4. Parent should not cause harm to children	0	0.0	188	100.0
5. Children should pray for parents' health and well-being even if they are dead	0	0.0	188	100.0
6. Obedience to one's father takes precedence over one's mother	160	85.1	28	14.9
7. Children should not belittle their parents	1	.5	187	99.5
8. Children should not say bad things about their parents	2	1.1	186	98.1
9. It is sinful to mistreat your parents	1	.5	187	99.5
10. Children should show respect and courtesy when interacting with parents	1	.5	187	99.5
11. Children should not talk back and raise their voices to their parents	5	2.7	183	97.3
12. Children should assist their parents financially if needed	2	1.1	186	98.9

factor analysis with varimax rotation was conducted on the items.

The filial expectation scale for the parents included nine items. Table 6 shows the indicators of the scale. The scale ranged from 10 to 30 points, the median was 30, and the standard deviation was 1.9. The Cronbach alpha value of the measure was .77.

The adult children's filial expectation scale consisted of 11 items. The scale ranged from 24 to 33 points; the median score was 32, with standard deviation of 2.1. The Cronbach alpha value of the scale was .61. The adult children's indicators are shown in Table 7.

Filial maturity. This scale consisted of six items for the parent samples. The scores of the scale ranged from 5 to 15 points; with 15 being the median, the standard deviation was 1.1. The Cronbach alpha value for this scale was .77 for parents. Table 8 presents the indicators for parents' filial maturity. For the adult children, this scale embodied seven items (Table 9). The scale ranged from 13 to 21; the median was 21, with a standard deviation of 1.7. The Cronbach's alpha, as a measure of internal consistency, was .64 for the children scale. (Appendix D shows the frequency distribution of filial maturity items).

Filial behavior. Table 10 shows the indicators of the parents' filial behavior scale. The response categories of

Table 6. Indicators of parents' filial responsibility expectation scale

Statements	Agreement					
	Disagree		Not sure		Agree	
	N	%	N	%	N	%
1. Adult child gives financial help	3	1.5	17	8.6	178	89.9
2. Adult child who lives close, visit at least once a week	8	4.0	13	6.6	177	89.4
3. Adult child feels responsible for parent	1	.5	3	1.5	194	98.0
4. Parent and adult child are together on festive occasions	1	.5	3	1.5	194	98.0
5. Parents can talk with adult child about important personal matters	5	2.5	8	4.0	185	93.4
6. Adult child gives emotional support to parent	1	.5	9	4.5	188	94.9
7. Adult child willing to sacrifice personal freedom to help parent	4	2.0	14	7.1	180	90.9
8. Adult child makes room for parent in home in an emergency	5	2.5	10	5.1	183	92.4
9. Adult child adjusts work schedule to help parent	15	8.0	26	13.8	147	78.2

Table 7. Indicators of adult children's filial responsibility expectation scale

Filial responsibility statements	Agreement					
	Disagree		Not sure		Agree	
	N	%	N	%	N	%
1. Adult child takes care of parent in whatever ways necessary when they are sick	1	.5	0	0.0	187	99.5
2. Adult child gives financial help	4	2.1	17	9.0	167	88.8
3. Adult child who lives close, visits at least once a week	12	6.4	20	10.6	156	83.0
4. Adult child who lives far, writes letters at least once a week	26	13.8	45	23.9	117	62.2
5. Parent and adult child are together on festive occasions	1	.5	6	3.2	181	96.3
6. Parent can talk with adult child about important personal matters	2	1.1	10	5.3	176	93.6
7. Adult child gives emotional support	1	.5	12	6.4	175	93.1
8. Adult child willing to sacrifice personal freedom to help parent	4	2.1	23	12.2	161	85.6
9. Adult child makes room for parent in home in an emergency	0	0.0	3	1.6	185	98.4
10. Adult child adjusts work schedule to help parent	15	3.0	26	13.8	147	78.2
11. Adult child adjusts family activities to help parent	3	1.6	24	12.8	161	85.6

Table 8. Indicators of parents' filial maturity scale

Statements	Agreement					
	Disagree		Not sure		Agree	
	N	%	N	%	N	%
1. I can depend on my child to help if I really need it	8	4.0	8	4.0	182	91.9
2. If something went wrong, my child would come to my assistance	3	1.5	7	3.5	188	94.9
3. I have a close relationship with my child that provides me with a sense of emotional security and well-being	1	.5	3	1.5	194	98.0
4. I can talk to my child about important decisions in life	5	2.5	6	3.0	187	94.4
5. I feel a strong emotional bond with my child	1	.5	6	3.0	191	96.5
6. I can depend on my child for aid if I need it	8	4.0	12	6.1	178	89.9

"when needed" and "not relevant" were recoded to the median category and to zero respectively.

This variable was created with 12 items for both the parents and the children samples. The internal consistency of the scale was .68 for the parent samples. The behavior scale

scores ranged from 14 to 61 for parents; the median was 39, with 10.62 as the standard deviation.

The scale for the adult children ranges from 13 to 66, the median was 37.5 and the standard deviation 12.0. The scale's internal consistency measure was 9.47. The adult children's indicators are presented in Table 11 (Appendix E shows the frequency distribution of the filial behavior items for parents and adult children).

Table 9. Indicators of adult children's filial maturity scale

Filial maturity statements	Agreement					
	Disagree		Not sure		Agree	
	N	%	N	%	N	%
1. I can depend on my parent to help if I really need it	26	13.8	39	20.7	123	65.4
2. If something went wrong, my parent would come to my assistance	4	2.1	26	13.8	158	84.0
3. I have a close relationship with my parent that provides me with a sense of emotional security and well-being	0	0.0	6	3.2	182	96.8
4. I can talk to my parent about important decisions in my life	2	1.1	7	3.7	179	95.2
5. I could turn to my parent for advice if I were having problems	2	1.1	5	2.7	181	96.2
6. I feel a strong emotional bond with my parent	1	.5	12	6.4	175	93.1
7. I can count on my parent in an emergency	12	6.4	31	16.5	145	77.1

Table 10. Indicators of parents' filial behavior scale

Statement	Frequency							
	Never	Once a year	2-4 times a year	5-11 times a year	Once a month	2-3 times a month	Once a week	Every day
1. Child visits parent	0.0	.5	1.5	7.1	17.7	13.1	40.4	19.7
2. Parent visits child	9.6	8.6	9.6	15.7	14.1	8.6	20.7	13.1
3. Child does heavy work	29.3	10.6	5.6	36.9	4.0	4.5	7.6	1.5
4. Child does light work	13.6	4.5	2.0	16.7	7.1	25.3	25.8	5.1
5. Parent does light work	72.7	6.6	1.0	9.1	3.5	2.5	3.5	1.0
6. Parent does heavy work	89.4	4.5	1.5	3.5	1.0	0.0	0.0	0.0
7. Child receives advice	5.1	4.0	6.1	20.2	10.6	29.3	21.2	3.5
8. Parent receives advice	22.7	4.5	7.1	41.4	5.6	3.0	14.1	1.5
9. Parent helps child in emergency	24.2	9.1	4.5	7.6	2.5	49.0	3.0	0.0
10. Child helps parent in emergency	20.7	5.1	2.5	5.1	3.0	57.6	6.1	0.0
11. Child takes parent to grocery/shopping/ doctor	27.8	5.1	5.6	10.1	41.4	4.5	5.1	.5
12. Child brings gifts on visit	3.0	2.5	1.0	24.2	12.6	10.6	40.9	5.1

Table 11. Indicators of adult children's filial behavior scale

Filial behavior	Frequency							
	Never	Once a year	2-4 times a year	5-11 times a year	Once a month	2-3 times a month	Once a week	Every day
1. Child visits parent	.5	.5	.5	2.7	13.3	16.0	35.6	30.9
2. Parent visits child	10.1	2.7	8.0	17.6	14.4	9.6	19.7	18.1
3. Child does light work	14.9	1.1	5.3	17.6	12.8	13.8	29.8	4.8
4. Parent does light work	68.1	0.0	9.0	12.2	4.8	.5	4.3	1.1
5. Child takes parent to grocery/shopping/doctor	21.3	2.7	20.2	41.0	6.4	5.9	2.1	.5
6. Child brings gifts on visit	2.1	0.0	5.3	19.7	19.7	20.7	28.2	4.3
7. Parent receives advice	25.0	1.1	17.0	32.4	8.0	7.4	8.5	.5
8. Child receives advice	4.3	.5	13.3	34.6	14.9	16.5	13.8	2.1
9. Child helps parent in emergency	25.5	2.7	26.1	31.9	5.9	4.3	3.7	0.0
10. Parent helps child in emergency	39.9	3.2	30.3	20.7	3.2	1.6	1.1	0.0
11. Child gives/lends money	18.1	3.2	6.9	35.1	33.0	1.6	2.1	0.0
12. Parent takes care of grandchild	42.6	2.7	15.4	16.0	4.8	4.3	7.4	6.9

CHAPTER 4. RESULTS AND DISCUSSIONS

The results of the research are presented in this chapter. The discussion covers (1) the descriptions of the parent samples and adult children samples, and (2) the results of the LISREL analyses.

Description of the Parent Samples

The parents' family structural and socioeconomic characteristics are presented in Table 12. More than 50% of the parents were mothers and 48% were fathers. Their age ranged from 50 years old to 91 years; the median age was 63 years old. Approximately 70% of the parents were married at the time of the study and 29% were widowed.

The availability of children was reflected in the number of living children that the parents had. The number of living children ranged from one child to 15 children; the median was seven children. The number of living children represents the potential available helpers that may be accessed in time of need. The number of children was larger than the national average of five children (Dept. Statistics, 1983).

Socioeconomic conditions of the parents were measured by the highest level of education achieved, employment status, type of current or previous employment, and the total household income for 1991. The majority (68%) of the parents

Table 12. Distribution of parents' family structural and socioeconomic characteristics

Characteristics	Distribution			
	N	Median	%	Std. Dev.
Gender				
Female	103		52.0	
Male	95		48.0	
Age		63		8.20
50-54	12		6.1	
55-59	34		25.3	
60-64	44		24.2	
65-69	34		14.6	
70-74	16		16.7	
75-79	12		7.1	
80+	6		6.1	
Marital status				
Married	137		69.2	
Divorced	2		1.0	
Separated	1		.5	
Widowed	58		29.3	
Number of living children		7		2.61
Highest level of education				
Never attended school	63		31.8	
Attended school	135		68.2	
Type of school				
Religious school	5		2.5	
Primary school	129		65.2	
Form 1-3	1		.5	
Not relevant	63		31.8	
Employment status				
Not employed	157		79.3	
Employed	41		20.7	

Table 12. Continued

Characteristics	Distribution			
	N	Median	%	Std. Dev.
Type of occupation (present/previous)				
Professional, administrator	0		0.0	
Technical	5		2.5	
Armed forces	37		18.7	
Business, proprietor	10		5.1	
Farmers, laborers	95		48.0	
Housewives	45		22.7	
Others	6		3.0	
Total household income (MR\$)		4450.0		9252.35
Below 5000	115		58.1	
5000-9999	60		30.3	
10000-14999	15		7.6	
15000-19999	3		1.5	
20000+	5		3.5	

attended school, while about 32% never attended school. Of those who attended school, the majority (65%) reported primary school education as the highest level of education attained. Many of the parents reported that, after attaining their primary school education, they entered further training to achieve their vocational choices. Thus, the primary level education may have been the highest available to them at the time they were growing up. Further, the majority of the

parents grew up during the British occupation of Malaya, and it seems probable that only primary school education was available to the majority of the populace.

The low level of education corresponds to the high percentage of the parents who indicated "farmers/laborers" as the type of occupation they were currently in or previously held. Subsequently, the low annual income of elderly households probably reflects the low lifetime achievement in annual income and the low-level occupations. None of the parents had professional occupations.

The total annual income for the households ranged from MR\$80 to MR\$120,000; the median was MR\$4,450 and the standard deviation was MR\$9,252.347. Using the conversion rate of one US dollar to MR\$2.48, the median income for the households was approximately US\$1,794; the income ranges from US\$33 to US\$48387. Chamburi (1989) indicated that the mean monthly rural household income for Malaysia in 1987 was MR\$10,236. Therefore, the annual income of the parents' household was within that range. However, there were parents who were below and above the national income. Nevertheless, this finding supported the reported income of respondents in the ESCAP (1989) study. In that research, 60% of the elderly households indicated their monthly incomes were less than MR\$500.

Close to 63% of the parents indicated that their health condition did not cause them any worry; still, 26% reported

some worry about their health, and about 10% experienced a great deal of worry. Generally, more than a third of the parents were not worried about their health.

Most of the parents in this study were healthy, married, and had a primary-level education. Many were not working, and had low annual incomes and a rather large number of children.

Description of the Adult Children Samples

The descriptions of adult children's family structural characteristics are presented in Table 13. Fifty-five percent of the adult children are female and 44% are male. Ages of the sample of adult children ranged from 19 years to 63 years old, with 36 years old as the median age. The majority (87%) of the adult children were married at the time of the study, while only 7% were never married. The mean number of children the adult children had was three.

About 31% of the adult children were the eldest child, and about 2% were the youngest child among their siblings. An equal percentage of the adult children were either second-born or third-born children (19.1% and 18.6%, respectively). The median parity size was seven siblings, with a standard deviation of 2.75.

Many of the adult children lived close to their parents. More than 60% of the adult children lived less

Table 13. Distribution of adult children's family structural characteristics

Variables	N	Median	%	Std. Dev.
Gender				.498
Female	104		55.3	
Male	84		44.7	
Age		36		8.836
Below 30	39		20.7	
30-34	34		18.1	
35-39	44		23.4	
40-44	34		18.1	
45-49	16		8.5	
50-54	12		6.4	
55-59	6		3.2	
60+	3		1.6	
Marital status				1.125
Married	164		87.2	
Divorced	6		3.2	
Widowed	4		2.1	
Never married	14		7.4	
Number of living children		3		2.377
Birth order				2.011
Only child	5		2.7	
Eldest child	58		30.9	
Second child	39		20.7	
Third child	35		18.6	
Fourth child	25		13.3	
Fifth and more	26		13.8	
Number of siblings		7		2.747
Proximity to parent(km)		1.8		28.380
Below 10 km.	128		68.1	
10-19.99 km.	12		6.4	
20-29.99 km.	8		4.3	
30-39.99 km.	15		8.0	
40-49.99 km.	8		4.3	
50-59.99 km.	7		3.7	
60+ km.	10		5.3	

than 10 kilometers from their parents; 1.8 kilometers was the median, with a standard deviation of 28.38.

As indicated in Table 14, the median number of years of education achieved by the adult children was nine years, with standard deviation of 3.884. More than a third of the adult children had a primary education, 17% had lower secondary education (form 1-3), about 29% had form 4-5 education level, and 7% had college or university education.

More than 60% of the adult children were employed, and 25% had never worked at the time this study was conducted. The socioeconomic status of the adult children was higher than that of their parents. The children's median household income was almost double (MR\$9,000, US\$3,630) that of their parents. The total household income ranged from MR\$500 (US\$201) to MR\$70,200 (US\$28,306).

Table 15 shows the parents' and adult children's perception of their own and their parents' health status. For the adult children, 80% reported that their health condition caused no worry, and 12% reported some worry. A fourth of the adult children perceived their parents' health as good (43%), 34% as fair, and 21% as poor.

In general, the adult children were in their late thirties, healthy, married, and had three children. They had nine years of education, and the majority were employed and had twice as much annual income as their parents.

Table 14. Distribution of adult children's socioeconomic characteristics

Variables	N	Median	%	Std. Dev.
Highest level of education (years)		9		3.9
Never attended school	8		4.3	
Primary school	71		37.8	
Form 1-3	32		17.0	
Form 4-5	54		28.7	
Form 6	6		3.2	
College/University	14		7.4	
Post-college	3		1.6	
Employment status				
Yes, full-time	115		61.2	
Yes, part-time	13		6.9	
Yes, retired	7		3.7	
Not employed	6		3.2	
Never employed	47		25.0	
Type of occupation (current/previous)				
Professional, administrator	18		9.6	
Technical	56		29.8	
Armed forces	12		6.4	
Business, proprietor	16		8.5	
Farmers, laborers	31		16.5	
Housewife	51		27.1	
Others	4		2.1	
Total household income (MR\$)		9000.0		10485.6
Below 5000	39		20.7	
5000-9999	68		36.2	
10000-14999	37		19.7	
15000-19999	19		10.1	
20000+	25		13.3	

Table 15. Parents' perception of their health, and adult children's perception of their own and their parents' health status

Health status	Parent		Adult children	
	N	%	N	%
Overall health cause worry				
No worry	125	63.1	151	80.3
Don't know	2	1.1	7	3.7
Some worry	52	26.3	23	12.2
A great deal	19	9.6	7	3.7
Perception of parents' health				
Poor	-	-	39	20.7
Fair	-	-	63	33.5
Good	-	-	80	42.6
Very good	-	-	6	3.2

Correlational Analyses of All Parents, Mothers, and Fathers Separately

The intercorrelations of the exogenous and endogenous variables for all parents, and for mothers and fathers separately, shown in Appendix F for greater detail. Variables that were significant at $p=.01$ with correlations of $r=.20$ and over will be discussed.

Gender was related significantly to marital status ($r=.400$) and education ($r=.570$). Male respondents tended to

be married and to have attended school. In addition, married parents were more educated than were unmarried parents ($r=.249$).

Health had a moderate positive correlation with age. The older respondents perceived that their health status was poor compared to younger respondents ($r=.292$).

Rating of overall parent-child relationships was related significantly to the affection scale, with a correlation of $r=.448$. Respondents who rated their relationship as good expressed a higher level of affection toward their children. Further, filial maturity was correlated significantly with filial expectation ($r=.352$), and parents with high filial maturity also expressed a higher level of filial expectation. In addition, rating of overall parent-child relationships correlated with filial behavior ($r=.202$). The positive correlation indicated that the better the quality of parent-child relationships, the higher the behavior interactions between parents and their adult children. Moreover, filial behavior correlated positively with affection ($r=.218$). The greater the affection parents expressed toward their adult children, the higher the interactions parents had with their adult children.

In the mothers' correlational analysis, age was related significantly to health ($r=.284$), rating of overall relationship ($r=-.336$), and income ($r=-.345$). Older mothers

perceived that their health caused them to worry more than did younger mothers. They also rated their overall relationship with their children lower than did younger mothers. In addition, they had lower incomes than younger mothers.

The married mothers reported higher affection scores than did nonmarried mothers ($r=.259$). Nonemployed mothers indicated a lower level of filial reverence than employed mothers ($r=-.333$). As expected, educated mothers reported higher incomes than did uneducated mothers ($r=.402$).

The rating of the overall parent-child relationship was correlated positively to income ($r=.318$) and affection ($r=.383$). Mothers with higher incomes had good relationships with their children. In addition, mothers with better overall relationships expressed higher levels of affection toward their children. Further, mothers who exhibited higher filial expectation also indicated higher filial maturity ($r=.396$).

For fathers, age was correlated significantly with marital status ($r=-.297$), health ($r=.313$), and employment ($r=-.213$). Older fathers were more likely to be unmarried and unemployed than were younger fathers, and older fathers perceived that their health status was poorer than did younger fathers.

Married fathers reported better overall relationships with their children than did nonmarried fathers ($r=.274$). Fathers who had better overall relationships with their

children also reported higher levels of affection toward their children ($r=.506$). The fathers with higher incomes, however, had lower levels of affection toward their children ($r=-.280$) than did those with lower incomes.

Filial expectation was correlated significantly with filial maturity in the father sample ($r=.319$). The correlation was moderate but positive, suggesting that the higher the expectation, the higher the maturity score.

Tests of the Filial Expectation Model for Parents, Mothers, and Fathers

Description of the models

The first model to be tested was the parent filial responsibility model, with three outcome variables, i.e., filial expectation, filial maturity, and filial behavior. Each outcome variable was treated separately in the individual model. The proposed relationships between the variables were shown in Figure 1. All the latent variables for all parents' models were single indicators: religiosity, filial reverence, filial expectation, filial maturity, and filial behavior with the exception of quality of the parent-child relationships. The quality of the parent-child relationship was a multiple indicator of overall rating of the relationship quality and the affection scale.

There were eight exogenous variables for the combined parents' model: gender, age, marital status, education, employment status, number of children, health, and income. The same exogenous variables were included in the mothers-only and fathers-only models except that gender was dropped from the separate models.

The input data for the analyses were diagonal correlation matrices. Modifications of the models to optimize fit were not conducted, because the investigator was testing theoretical models and assessing the fit of the data to those models. The null hypotheses of the models were that the proposed models do not differ significantly from the models that fitted the data exactly. The results of the model testings are presented below. Only coefficients that were significant at the two-tailed test are discussed.

Results of Model P1 for parents

Table 16 provides greater detail of the significant paths for all parent models in the study. Figure 4 represents the final model of filial expectation for parents combined. The values in brackets represent the t -values and the significant unstandardized coefficients (b).

Gender ($t=-2.19$, $b=-.17$) had a negative relationship with quality of relationship. Male respondents had a poorer quality of parent-child relationship with their adult children

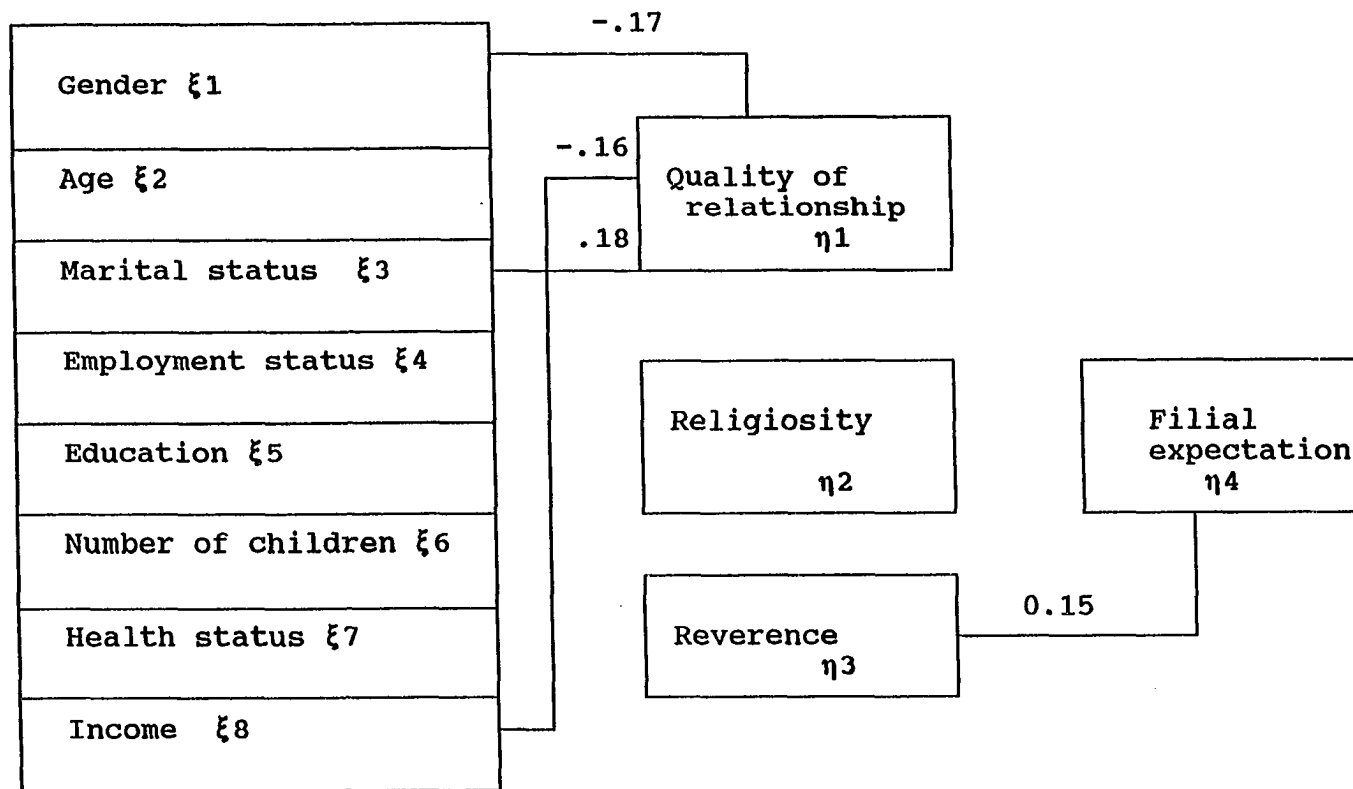


Figure 4. Model P1: Final filial expectation model for parents

than did female respondents. This result indicated that fathers may not be close to their children, which might lessen the feeling of affections toward their children. It also might reflect the socialization process for Malay males, who are not socialized to be expressive. Moreover, the attachment bond among females is stronger than in males (Troll & Smith, 1976). Further, O'Connor (1990) reported that the mothers' relationships with their adult children were close.

On the other hand, the married parents had a better quality of parent-child relationship with their children than did the non-married respondents ($t=2.65$, $p=.18$). Further, household income ($t=-2.53$, $p=-0.16$) was a significant predictor of the quality of the parent-child relationship. Parents with higher incomes had a lower quality of relationship with their adult children than did parents with lower incomes. The result supported the finding of Umberson (1992). She found that parents with high incomes reported more parental dissatisfaction and more strain in the parent-child relationships. They were also less supportive of their adult children.

Married parents would be expected to indicate better quality parent-child relationships, due to their involvement and experiences in family life. It was quite surprising to discover that incomes affected the quality of the relationship. A potential explanation for this might

Table 16. Structural models for parents, mothers, and fathers with significant LISREL estimates

	Filial expectation					
	Parents		Mothers		Fathers	
	Model P1		Model Pla		Model Plb	
	t-		t-		t-	
	value	USC ^a	value	USC	value	USC
η_1 = Quality of relationship						
Gender	-2.19	-0.17	--	--	--	--
Age	--	--	-2.30	-0.23	--	--
Marital status	2.65	0.18	--	--	2.82	0.26
Number of children	--	--	--	--	2.21	0.19
Income	-2.53	-0.16	2.22	0.23	-3.28	-0.30
η_2 = Religiosity						
Number of children	--	--	-2.62	-0.26	--	--
η_3 = Reverence						
Employment	--	--	-3.23	-0.32	--	--
Health	--	--	--	--	--	--
η_4 = Expectation/maturity/behavior						
Marital status	--	--	-2.32	-0.21	--	--
Health	--	--	--	--	--	--
Income	--	--	--	--	--	--
β_1 = Quality of relationship	--	--	--	--	--	--
β_2 = Religiosity	--	--	2.00	0.19	--	--
β_3 = Reverence	2.13	0.15	2.10	0.20	--	--

^aUSC = Unstandardized coefficient.

-- = Nonsignificant coefficient.

[illegible]

be that parents with higher incomes might not be dependent on the children's assistance. The feelings of independence thus influenced the parents' outlook toward family life.

None of the exogenous variables were significantly related to religiosity and filial reverence. In addition, filial reverence correlated positively with filial expectation ($t=2.13$, $p=0.15$). Parents who hold stronger attitudes of filial reverence also hold stronger filial expectations. Since attitudes of reverence are based on religious teachings, parents who were more aware of the requirements of the duties of parents and children would express higher levels of filial expectation. Moreover, filial reverence is a requirement for Malays. Lapidus (1978) indicated that in adulthood, Muslim individuals can integrate the norms of the religion and the culture. In this situation, parents who held higher levels of filial reverence may have achieved a level of religious maturity that enables them to express the norms of the religion and culture.

Results of Model Pl_a for mothers

The significant paths for the mothers' filial expectation model are presented in Figure 5. Mothers' age ($t=-2.30$, $p=-.230$) and income ($t=2.22$, $p=.23$) were significant predictors of the quality of the parent-child relationship. The correlation suggests that relationship quality deteriorates

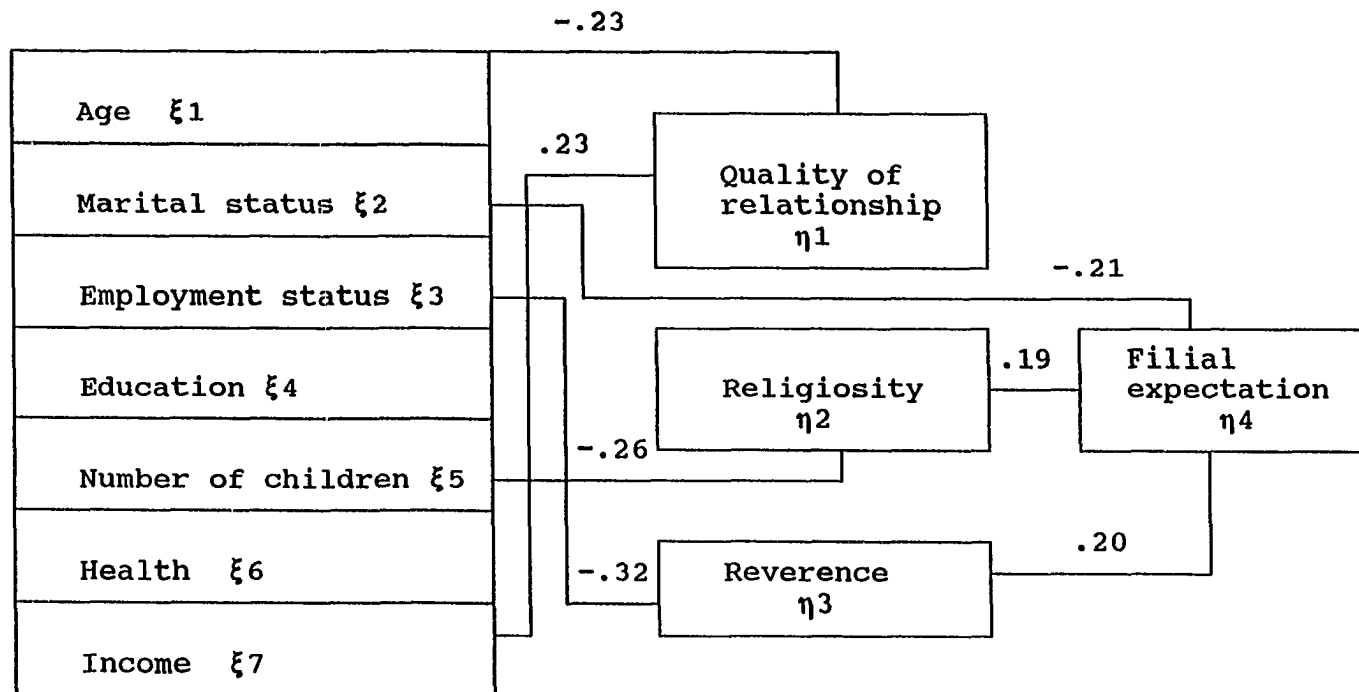


Figure 5. Model P1a: Final filial expectation model for mothers

with age. The affective quality of the parent-child model for mothers' relationship may reflect the unbalanced pattern of reciprocity in old age. The possibility exists that conflicts in the relationships might occur due to the demand for assistance from the mothers when the children may not be able to fulfill the role. Similarly, Noelkar and Wallace (1985) indicated that children who perceived that their duties to parents might conflict with their other roles (worker and other family roles) would feel less obligated to their parents. In addition, Scharlach (1987) demonstrated that the relationship quality between parents and children improved with low role demand overload and decreased in role inadequacy.

On the other hand, income was correlated positively with relationship quality. Mothers with higher incomes reported better quality of parent-child relationships. The finding supported the results of the Johnson and Bursk (1977) study. They indicated that parents who perceived they had more adequate income reported higher ratings of the quality of the parent-child relationship.

The number of children was negatively related to religiosity ($t = -2.62$, $b = -0.26$). Mothers who had fewer children attended more religious lectures than did mothers with more children. This result indicated that mothers with more children may more likely be involved in looking after

more grandchildren, which provided lesser opportunities to attend lectures than did mothers with fewer children.

Filial reverence was predicted significantly by employment status ($t=-3.23$, $b=-0.32$). Employed mothers indicated lower level of filial reverence than did unemployed mothers. This result seem to indicate that the attitudes of filial reverence were dependent on needs. Employed mothers expressed lower levels of filial reverence than did unemployed mothers. Moreover, married mothers were more likely not to expect help from adult children than did unmarried mothers.

Marital status correlated negatively with filial expectation ($t=-2.32$, $b=-0.21$). Nonmarried mothers exhibited higher levels of filial expectation than did married mothers. As expected, as married mothers depend more on their spouses, while mothers who are not married depend more on their children. The result seem to support Marshall et al. (1987) findings. They indicated that widowed parents were more likely than married respondents to expect help from their children.

Religiosity exhibited a weak positive correlation with filial expectation ($t=2.04$, $b=0.19$). Mothers who attended religious lectures reported higher filial expectation than did mothers who did not attend these lectures. In addition, mothers with high filial reverence expressed high filial expectation ($t=2.10$, $b=0.20$). Attendance at religious

lectures would increase the religious knowledge of mothers, which translated into higher filial expectation.

Results of Model P1b for fathers

Figure 6 shows the significant coefficients of the fathers' filial expectation model. Three exogenous variables--marital status, number of children, and income--had significant correlations with the quality of the parent-child relationship. Marital status produced positive correlations with relationship quality. Married fathers exhibited a high level of relationship quality with adult children ($t=2.82$, $p=0.006$). As with the parents' combined group, fathers who were married held a more positive evaluation of the quality of the parent-child relationship.

Similarly, the number of children shows a weak positive correlation with quality of the parent-child relationship ($t=2.21$, $p=0.03$). Having more children provided fathers with greater opportunities to invest in affective parent-child relationships. On the other hand, income manifested a negative correlation with quality of parent-child relationship. Fathers with higher incomes indicated a lower quality of relationship with their children ($t=-3.28$, $p=0.001$), contrasting the positive contribution of income to the quality of the relationships in mothers. Yet, it supported the finding for the parents combined.

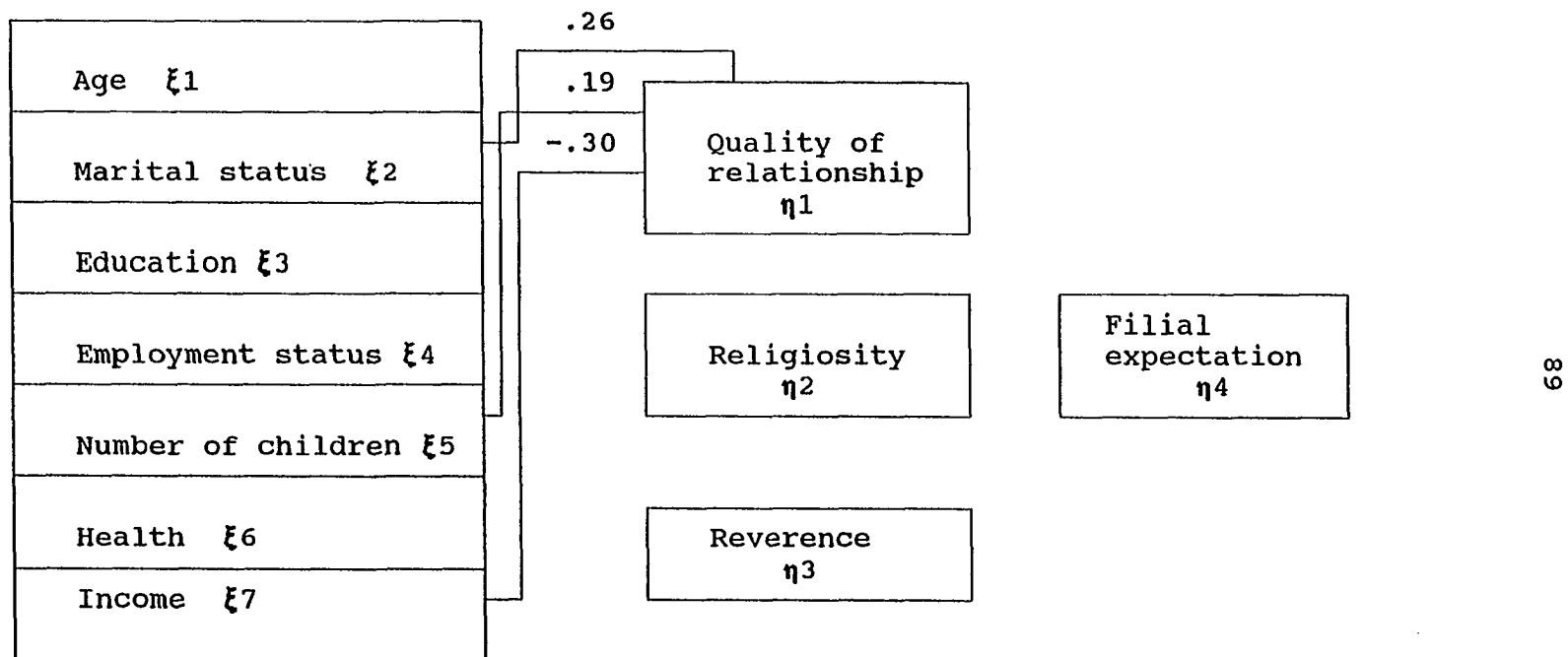


Figure 6. Model P1b: Final filial expectation model for fathers

There were no significant predictors of religiosity and filial reverence in the fathers' model. Additionally, none of the latent variables (quality of relationship, religiosity and filial reverence) was significantly related to filial expectation. The outcome of these findings may reflect the sense of independence of the fathers relative to the support of their children.

Summary

The results of the filial expectation models were quite similar across the three different group of respondents (parents combined, mothers, and fathers). Quality of relationship was associated significantly with income. The direction of association for mothers was positive, while for both parents combined and for fathers the directions were negative. Similarly, quality of relationship showed a positive correlation with marital status for parents and fathers, but was not significant for mothers. In addition, quality of relationship was related negatively with gender for both parents combined.

Quality of relationship was associated negatively with mothers' age and related positively to number of children for fathers. The quality of parent-child relationship, therefore, was determined by income for all respondents; by gender and

marital status for both parents combined; by age for mothers; and by marital status and number of children for fathers.

Religiosity produced inconsistent results across the three samples. None of the indicators produced significant correlations with parents or with fathers. Religiosity was related negatively to number of children for mothers. In addition, reverence was associated negatively with employment status for mothers-only group, but not for fathers separately and combined parents.

Filial expectation was related negatively to marital status and associated positively for mothers-only group, but not for parents combined or for fathers separately. Filial expectation was associated positively with reverence for mothers-only group and all parents group, but not for fathers-only group. Therefore, the significant predictors of filial expectations were religiosity, reverence, and marital status for mothers only, and reverence for parents together.

Tests of the Filial Maturity Model for Parents, Mothers, and Fathers

Results of Model P2 for parents

The significant coefficients of the filial maturity model for parents are shown in Figure 7. Three exogenous variables, namely gender, marital status, and income predicted the quality of the parent-child relationships. Gender and income

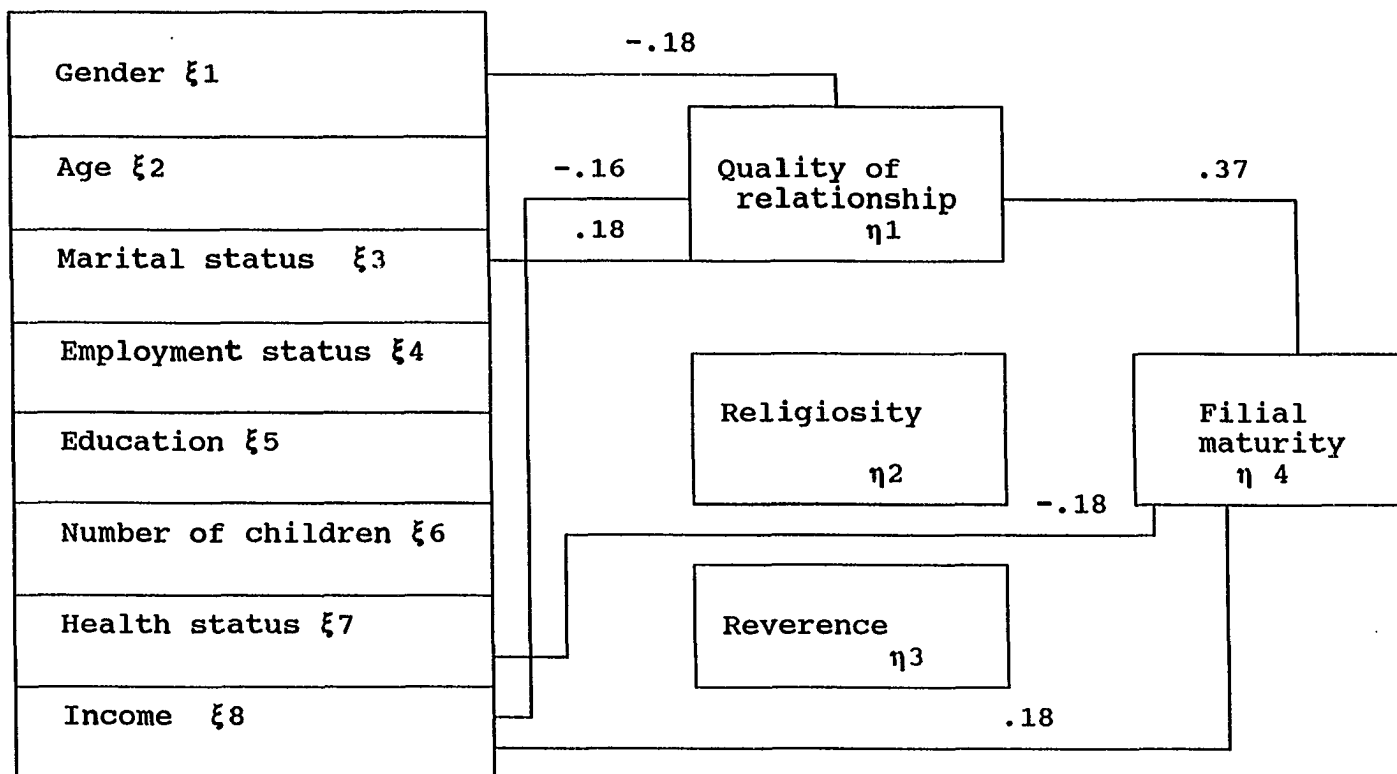


Figure 7. Model P2: Final filial maturity model for parents

were associated negatively with the quality of the parent-child relationship. The direction of the correlations was similar, i.e., $b=-0.18$ for gender and $b=-0.17$ for income. Therefore, male parents with high incomes expressed a lower level of parent-child quality of relationship. None of the exogenous indicators was associated with religiosity and filial reverence.

Filial maturity was associated with health and income. Filial maturity increases as income increases ($t=2.34$, $b=0.18$). Parents with high incomes expressed a high sense of filial maturity. As maturity was defined as the feeling of being dependable, one would expect that having the financial resources would contribute to the sense of being dependable.

On the other hand, filial maturity was negatively correlated with health ($t=-2.55$, $b=-0.18$). Parents who had poorer health indicated lower filial maturity scores. This supported what Blenkner noted when she discussed filial maturity in 1965. She stated that when parents can no longer be looked on as a source of support, a filial crisis may develop. In this context, parents' poor health may signal the need for support from the children, and, if the children were not ready to assist, filial crisis would evolve, as reflected in the lower filial maturity scores. Health showed a stronger relationship with filial maturity than did either income or age. In addition to the associations with the exogenous

variables, quality of relationship demonstrated a positive correlation with filial maturity ($t=2.42$, $b=0.37$). A positive quality of the relationship between parents and children implied that children and parents understood each other, and this contributed to the filial feelings of being matured. When the children and parents understood each other, they could evaluate the relationships objectively. Nydegger (1991) suggested that negative emotions such as resentments would hinder the sense of filial distancing that in turn might contribute to less filially mature behaviors.

Results of Model P2a for mothers

The results of the filial maturity model for mothers-only are presented in Figure 8. As with Model P2, income was a significant correlate of quality of the parent-child relationship. Mothers who had higher incomes had a higher quality relationship with their children ($t=2.25$, $b=0.23$). In contrast, mothers' age was related significantly and negatively to quality of the parent-child relationship ($t=-2.23$, $b=-0.22$).

Number of children was associated significantly and negatively with religiosity ($t=-2.62$, $b=-0.26$). Mothers who had more children reported lower religiosity scores than did mothers with fewer children.

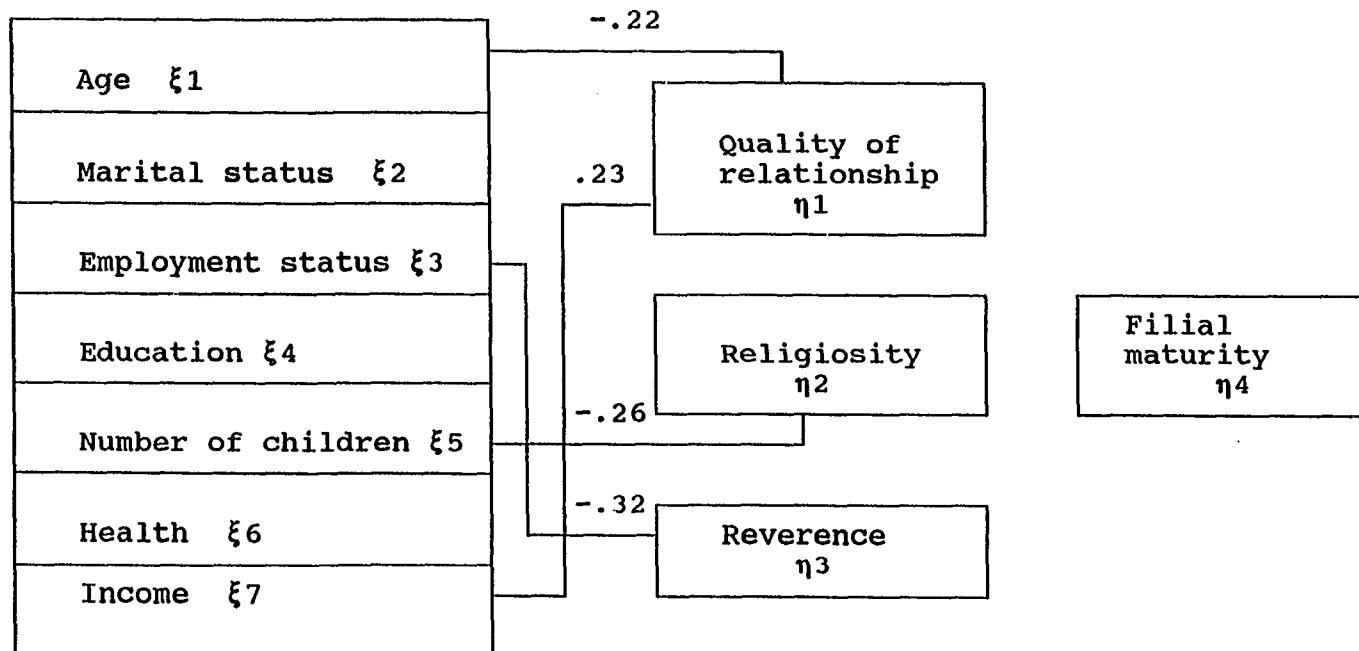


Figure 8. Model P2a: Final model of filial maturity for mothers

Employment status was correlated significantly with filial reverence. It seems that employed mothers exhibited lower level of filial reverence than did nonemployed mothers ($t=-3.23$, $b=-0.32$). None of the exogenous and the endogenous variables correlated significantly with filial maturity.

Results of Model P2b for fathers

Figure 9 presents the significant paths for the fathers-only group. The predictors of fathers' perceived quality of the parent-child relationship were similar to those of the combined parents' model (Model P2). Marital status evinced a positive association with the quality of the parent-child relationship ($t=3.00$, $b=0.28$). Number of children was related positively to the quality of the parent-child relationship, although the correlation was weak ($t=2.17$, $b=0.19$).

Income had a negative correlation with quality of the parent-child relationship ($t=-3.29$, $b=-0.31$). However, the correlation was higher than those for marital status and number of children. Low-income fathers possessed better-quality relationships with their children than did high income fathers.

Fathers' health was related negatively with filial reverence ($t=-2.13$, $b=-.22$). Fathers with fewer health worries expressed higher filial reverence scores than did

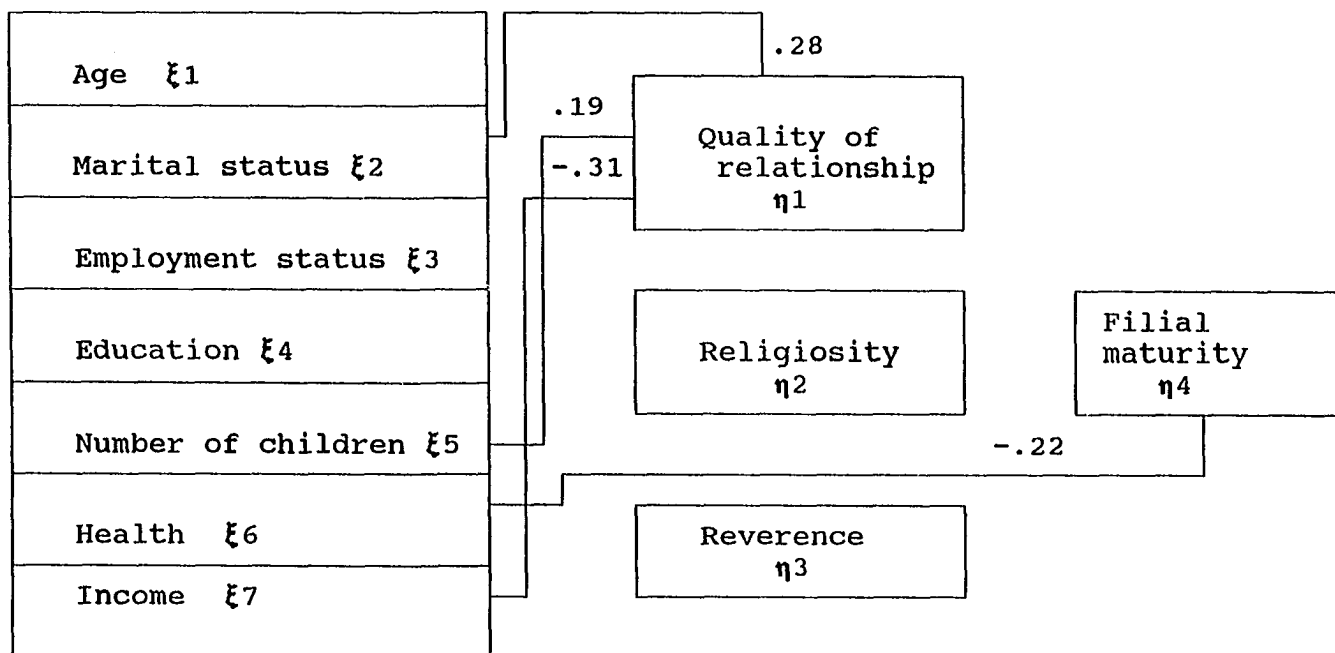


Figure 9. Model P2b: Final model of filial maturity model for fathers

fathers with more health worries. Like the mothers, fathers too, had no significant exogenous and endogenous predictors of filial maturity.

Summary

The results for the model using filial maturity as an outcome variable showed a pattern similar to that for the model using filial expectation as an outcome variable, i.e., the predictors for parents combined, mothers, and fathers varied considerably. Quality of relationship was correlated consistently with income for all samples (mothers, fathers, and parents). Further, quality of relationship was related positively to marital status for parents together and for fathers alone. On the other hand, quality of relationship was related negatively to gender for parents, related negatively to age for mothers.

Religiosity was related negatively to number of children for mothers. None of the indicators was correlated significantly to religiosity for parents or fathers.

Filial reverence was associated negatively with health status for fathers and negatively to employment for mothers. None of the exogenous indicators were significantly related with filial reverence for parents combined.

Filial maturity was associated negatively with health for parents combined. Filial maturity was related positively with

income and quality of relationship, and negatively with health status for parents combined. In summary, the significant predictors of filial maturity were health, income, and quality of relationship for parents combined.

Tests of the Filial Behavior Model for Parents, Mothers, and Fathers

Results of Model P3 for parents

In the filial behavior model (Figure 10), the quality of the parent-child relationship was predicted significantly by gender, marital status, and income. Gender exhibited a negative correlation with relationship quality ($t=-2.23$, $b=-0.18$). Mothers experienced a higher relationship quality than did fathers.

Married parents perceived a better quality of the parent-child relationship than did nonmarried parents. The correlation with marital status was positive ($t=2.71$, $b=0.18$).

Income showed a weak negative relationship with quality of parent-child relationship ($t=-2.59$, $b=-.16$). It seems that higher incomes tended to reduce the quality of parent-child relationship for parents.

None of the exogenous variables was related significantly to religiosity and filial reverence. The only exogenous variable that indicated a significant relationship with filial behavior was marital status ($t=-2.44$, $b=0.20$).

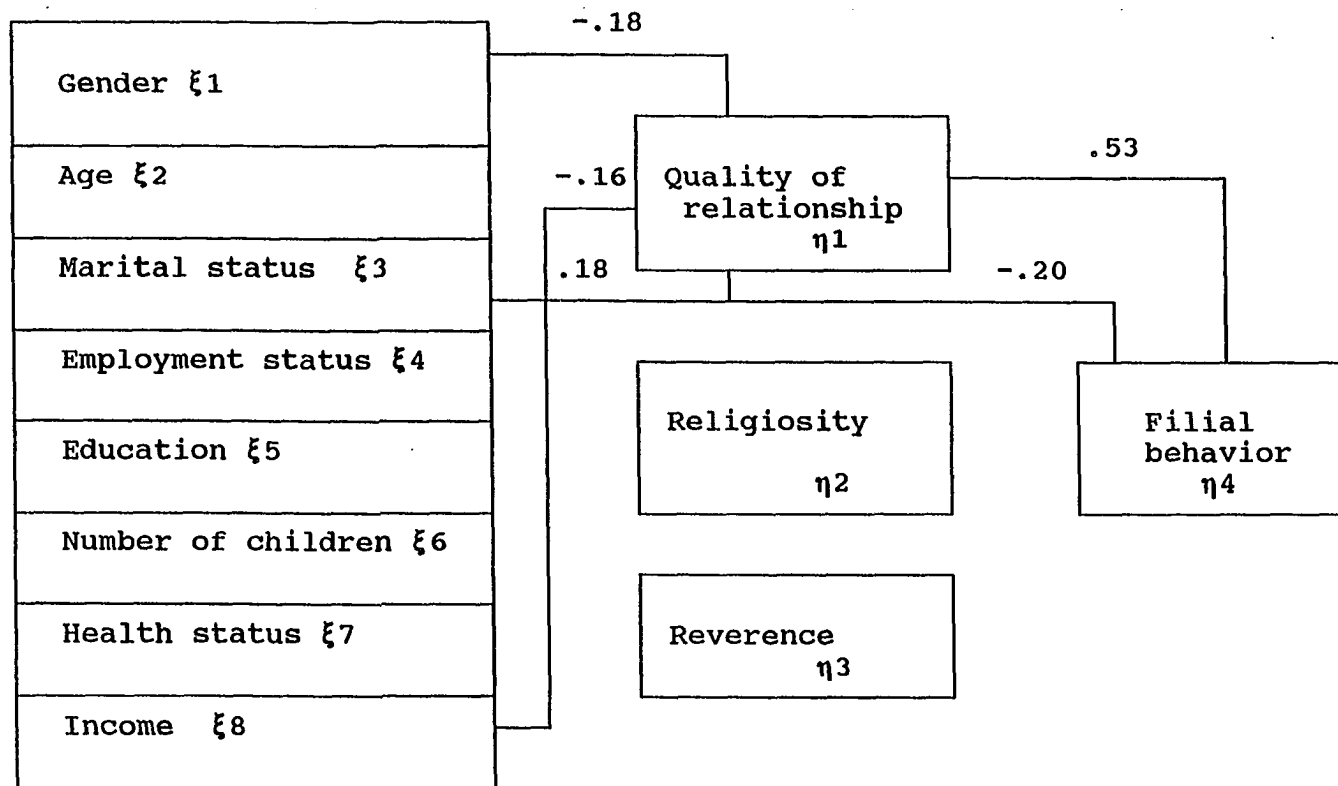


Figure 10. Model P3: Final filial behavior model for parents

Married parents performed greater numbers of filial tasks than did unmarried parents.

Results of Model P3a for mothers

The significant coefficients of the mothers' model are shown in Figure 11. The quality of relationship was associated significantly with age and income. Age was related negatively to the quality of parent-child relationships ($t=-2.26$, $b=-0.23$). Older mothers reported a lower quality of relationship with their adult children than did younger mothers. Further, mothers who possessed higher incomes reported a better quality of parent-child relationship ($t=2.28$, $b=0.23$).

The number of children the mothers had was a determinant of the mothers' religiosity ($t=-2.62$, $b=-0.26$). Mothers with fewer children reported higher religiosity scores than mothers with more children.

The determinants of filial reverence for mothers-only were employment ($t=-3.23$, $b=-0.32$). Employed mothers expressed less filial reverence than did unemployed mothers.

Results of Model P3b for fathers

The quality of the relationships between fathers and adult children was determined by marital status ($t=2.72$, $b=0.25$), the number of children ($t=2.22$, $b=0.19$), and income

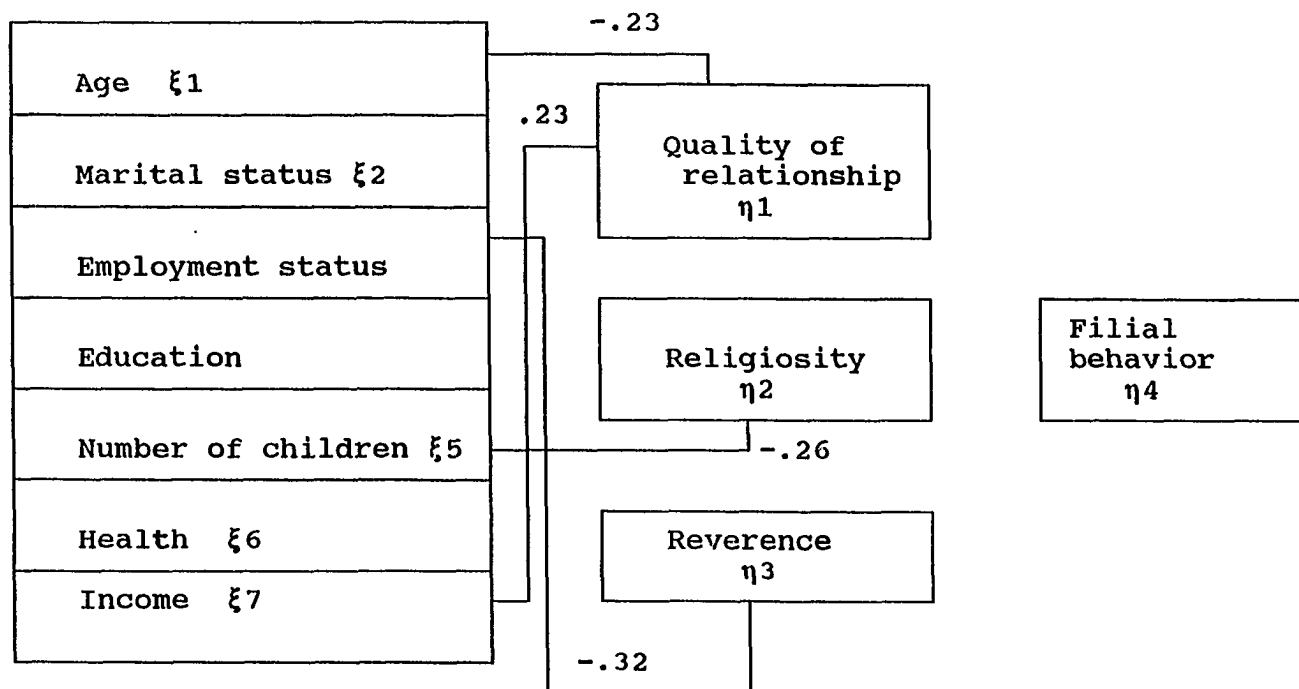


Figure 11. Model P3a: Final filial behavior model for mothers

($t=-3.26$, $b=-0.30$). Married fathers showed a higher tendency toward filial behaviors than did unmarried fathers.

Similarly, fathers with more children indicated more opportunities for filial behavior involvement. On the other hand, fathers with higher incomes demonstrated fewer opportunities for filial behavior involvement than did lower-income fathers. All other variables in the model were not significant (Figure 12).

Summary

The filial behavior model also shows a similar pattern across the three group of respondents. Quality of relationship was associated negatively with income for both parents together and for fathers only, but was positive for mothers only. Similarly, marital status was related positively to quality of relationship for all parents and fathers. In addition, age was correlated negatively with the quality of relationship for mothers, while number of children was related positively to the quality of relationship for fathers.

Religiosity was associated negatively with number of children for mothers but not for either parents or fathers. Filial reverence was related negatively and significantly with employment status in the mothers' model.

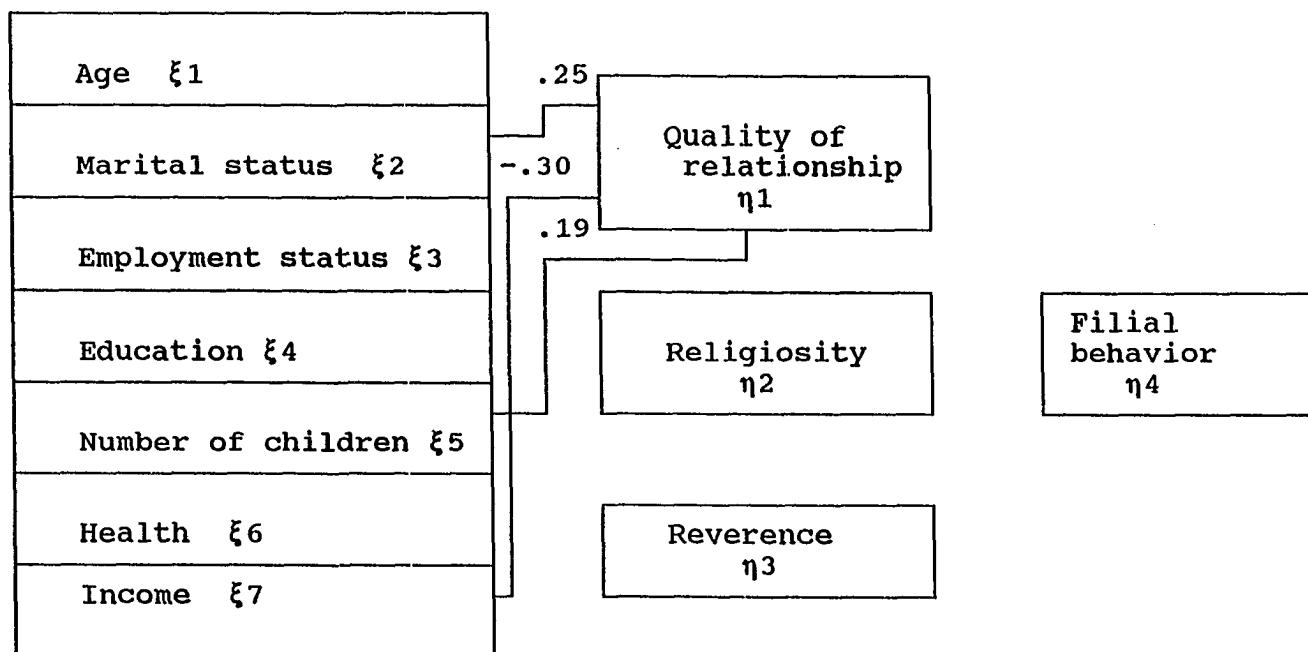


Figure 12. Model P3b: Final filial behavior model for fathers

Filial behavior was related negatively to marital status for both parents combined, while none of the exogenous variables were significant for mothers-only and fathers-only. In addition, filial behavior was associated positively with quality of parent-child relationships for parents combined.

To recapitulate, the predictors of filial behavior for parents combined was marital status and quality of parent-child relationships. No significant predictors of filial behavior were found for fathers-only and mothers-only groups.

The summary statistics of the parent models are shown in Table 17. The goodness of fit index, adjusted goodness of fit, root mean square residual, and chi-square values are four criteria that are used to test the overall fit of the model to the data. Goodness of fit index is a measure of the relative values of variances and covariance in the sample variance-covariance, S (Bollen, 1989). The value of the goodness of fit generally is between 0 and 1, but in some cases the value may be negative. The goodness of fit index (GFI) is relatively robust against departure from normality. However, the statistical distribution is unknown and does not adjust for the degrees of freedom.

On the other hand, adjusted goodness of fit (AGFI) is adjusted to the number of degrees of freedom relevant to each model. If fewer parameters are in the model, the value of AGFI will be higher.

Table 17. Comparison of summary statistics for parents', mothers', and fathers' filial expectation, filial maturity, and filial behavior models

	Filial expectation			Filial maturity			Filial behavior		
	Model P1	Model P1a	Model P1b	Model P2	Model P2a	Model P2b	Model P3	Model P3a	Model P3b
	Parent	Mother	Father	Parent	Mother	Father	Parent	Mother	Father
	N=198	N=103	N=95	N=198	N=103	N=95	N=198	N=103	N=95
Goodness of fit index	.990	.971	.985	.990	.971	.983	.990	.975	.984
Adjusted goodness of fit	.929	.814	.900	.930	.810	.892	.931	.834	.898
Root mean square residual	.025	.043	.026	.025	.044	.027	.025	.041	.026
χ^2	13.640	19.410	9.280	13.440	19.730	9.970	13.370	16.970	9.430
p-value	.400	.079	.679	.414	.072	.618	.420	.151	.666
R^2	.293	.495	.461	.320	.461	.480	.301	.471	.443
$R^2(\eta_1)$	.160	.259	.321	.160	.272	.311	.161	.267	.322
$R^2(\eta_2)$	.056	.108	.051	.056	.108	.051	.056	.108	.051
$R^2(\eta_3)$	.046	.124	.058	.046	.124	.058	.046	.124	.058
$R^2(\eta_4)$	.114	.197	.156	.157	.116	.212	.168	.172	.157
df	13	12	12	13	12	12	13	12	12

Root mean square residual (RMR) is a measure of the average of the residual variances and covariances. This can be interpreted only in relation to the size of the observed variances and covariances in S (Joreskog & Sorbom, 1986).

Another measure of overall goodness of fit is the chi-square value. It is a likelihood ratio test statistic for testing the model against the alternative model. Nonsignificant chi-square values are desired when testing the fit of the model (Bentler & Bonnett, 1980). In addition Wheaton (1987) indicated that a p-value for chi-square larger than .05 demonstrates that the fit of the model was adequate.

In this research, all three models of filial expectation, maturity, and behaviors had very good fit indices. The adjusted goodness of fit index was highest for both parents combined, while for mothers only it was the lowest. The residual mean squares (RMR) were below 0.3 for parents combined and for fathers only, whereas, for the mothers only, the value of RMR was larger than 0.40. The chi-square values were low for parents combined and for fathers only, and were not significant.

The total coefficients of determination of the three parent models were varied. The percentage of variance explained by the filial expectation, filial maturity, and filial behavior models for parents only were approximately 30%. However, the proportion of variances explained by the

separate mothers-only and fathers-only models were greater than for the combined parent models. The variances explained in the mothers-only model (P1a, P2a, and P3a) were highest, compared to fathers only and parents combined.

Examining the squared multiple correlations of the models, the patterns were quite different from the distributions of the coefficients of determination of the full models. The strength of the quality of the parent-child relationships (η_1) was highest for the fathers-only group in all three models (.32, .31, and .32, respectively). On the other hand, religiosity (η_2) and reverence (η_3) were strongest for mothers in all three filial responsibility models. In addition, mothers-only produced high R^2 (.19 and .17, respectively) with filial expectation (η_4) and filial behavior (η_4) as outcome variables. However, fathers-only group produced high R^2 with filial maturity (η_4) as the outcome variable (.21). These coefficients indicated that separate measurement models were not good measurement instruments for the latent variables, but that the variables serve better jointly.

The assessment of fit indicates that the overall fit of the data to the models was good for both parents combined and for fathers only. The fit indices in the mothers-only group did not indicate a good fit of the model to the data, although the proportions of variance explained by the models were the

highest (46% to 50%). Therefore, the assessment of fit statistics indicated that the data for both parents combined and for fathers only fitted the model better than for the mothers-only group.

Correlational Analyses of Adult Children, Daughters, and Sons

The bivariate correlations of the adult children samples are shown in Appendix G. As with the parent samples, only correlations significant at $p=.01$ and with a value of .20 and above will be presented. Gender of adult children correlated significantly with education ($r=.397$) and employment status ($r=.432$). Male children were better educated than were female children. Male children were more likely to be employed than were female children. Gender of adult children correlated significantly with filial maturity ($r=-.230$) and filial behavior ($r=-.236$). Female children indicated a higher level of filial maturity and filial behavior than did male children.

Age of the adult children was correlated significantly with education ($r=-.486$), number of children ($r=.615$), proximity ($r=-.267$), birth order ($r=-.347$), perception of parents' health ($r=-.243$), and number of siblings ($r=-.214$). Younger children had fewer years of education than did older children. Consequently, older adult children were in lower birth-order position than the younger adult children. The

older adult children have more children than do the younger adult children.

On the other hand, younger children live further from their parents than do older children. Similarly, younger adult children perceived their parents' health condition to be poorer than did the older adult children. Older adult children reported fewer siblings alive than did younger adult children. Additionally, younger adult children expressed higher filial maturity and filial behavior than did older adult children.

Marital status of the adult children was correlated positively with number of children ($r=.303$). Married adult children reported that they had more children than did nonmarried adult children. Further, married adult children reported higher incomes than did nonmarried adult children ($r=.224$).

Educated adult children were more likely to be employed ($r=.366$) and they had fewer children ($r=-.452$) than the less educated adult children. In addition, better-educated ($r=.463$) and employed ($r=.245$) adult children had higher incomes compared to less educated and unemployed adult children. Furthermore, employed ($r=.218$) and educated ($r=.375$) adult children lived farther away from their parents than did unemployed and lower educated adult children.

The number of children the adult children had correlated negatively with proximity ($r = -.222$) and birth order ($r = -.280$). Adult children with fewer children lived further away from their parents than did adult children with more children. Moreover, adult children who were in lower birth order positions among their siblings had more children than did older adult children. Subsequently, adult children with larger sibling networks had fewer children.

Adult children's proximity to parents correlated significantly with income ($r = .446$). Less proximate children had higher incomes than did proximate children. Adult children's birth order related positively to number of siblings ($r = .286$). Adult children with large sibling size were in higher ordinal positions and they also indicated higher incomes than adult children in lower birth-order positions who had fewer siblings.

Religiosity correlated significantly with income ($r = .307$). The positive correlation was moderate. Adult children with higher religiosity reported higher incomes than did adult children with lower incomes.

Adult children's filial expectation correlated significantly with filial maturity ($r = .344$). Higher filial expectations were related to higher filial maturity. Further, filial maturity correlated significantly with filial behavior

($r=.243$). Adult children who had a higher level of filial maturity had higher level of filial behaviors.

The daughters' age correlated significantly with education ($r=-.536$), number of children ($r=.586$), birth order ($r=-.380$), and perception of parents' health ($r=-.305$). Daughters who were older were less educated and had more children than younger daughters. Further, they occupied lower ordinal positions in the sibling network and perceived their parents' health to be poorer than did younger daughters.

Better-educated daughters were more likely to be employed ($r=.315$), reported fewer children ($r=-.473$), and lived further away from their parents ($r=.310$). In addition, better-educated ($r=.446$) daughters had higher incomes compared to less-educated children. Furthermore, employed daughters had fewer children ($r=-.272$), lived at a greater distance from their parents ($r=.258$), and were less likely to be married ($r=-.320$).

The number of children correlated negatively with birth order ($r=-.338$). Daughters who occupied higher birth-order positions had fewer children. Further, daughters who occupied higher birth-order positions reported more siblings alive than daughters who occupied the lower birth-order positions ($r=.286$).

Proximity to parents correlated positively with employment ($r=.258$) and education ($r=.310$). Daughters who

lived further away from their parents were better-educated and were employed.

Further, the overall quality of the parent-child relationship had a moderate correlation with affection ($r=.272$). The higher the perceived quality of relationship, the higher the affection the daughters had for their parents.

On the other hand, the perception of parents' health had a significantly positive correlation with number of siblings ($r=.266$). Daughters who had a larger sibling network perceived their parents' health as better than did daughters with fewer siblings. Similarly, religiosity correlated positively with income ($r=.332$). Daughters with higher incomes reported higher religiosity scores than were daughters with lower incomes.

In the daughters' group, filial expectation correlated positively with filial maturity ($r=.378$) and filial reverence ($r=.275$). Daughters who scored higher on filial maturity also had higher scores on filial expectation and filial reverence. In addition, daughters' filial reverence correlated positively with filial maturity ($r=.258$). Daughters with higher levels of filial reverence were more likely to report higher level of filial maturity.

Age of the adult sons correlated significantly with marital status ($r=.404$), education ($r=-.458$), number of children ($r=.649$), proximity ($r=-.291$), and birth order

($r = -.314$). Older sons were more likely to be married, reported fewer years of education, and had more children than did younger sons. Further, the older sons lived closer to their parents than did younger sons, and younger sons were in lower birth-order position than were older sons.

Marital status correlated significantly with number of children ($r = .446$), birth-order ($r = -.268$), and filial behavior ($r = .282$). Married sons had a greater number of children than did nonmarried sons, while married sons exhibited higher levels of filial behaviors than did nonmarried sons. In addition, married sons occupied lower birth-order positions than did nonmarried sons. Furthermore, adult sons who occupied lower birth-order positions reported more siblings alive than sons who occupied the lower birth-order position ($r = .291$).

Better-educated sons had fewer children ($r = -.392$) and lived at a greater distance from their parent ($r = .425$). In addition, better-educated sons had higher incomes than did less-educated sons ($r = .492$).

The number of children the adult sons had correlated negatively with proximity ($r = -.301$) and overall quality of the parent-child relationship ($r = -.377$). Adult sons who had fewer children lived closer to parents and reported poorer overall parent-child relationship quality.

Religiosity correlated positively with income ($r=.288$). Adult sons with higher incomes attended religious lectures more regularly than did sons with lower income.

The filial behavior of the adult sons correlated positively with affection ($r=.408$). Adult sons who expressed a higher level of affection for their parents exhibited a higher level of filial behaviors.

Tests of the Filial Expectation Model for Children, Daughters, and Sons

Description of the models

The adult children's models and the parents' models were very similar. The three exogenous variables of birth order, proximity to parents, and number of siblings, and an endogenous variable, adult children's perception of parents' health, were added to the adult children's models. In the children's models, the latent variable, quality of relationship, was a single indicator. This step was adopted because there was a weak correlation between overall rating of the quality of parent-child relationship and the affection variable.

The proposed relationships among the variables were shown in Figure 2. Eleven variables were entered into the model as exogenous variables. These variables were gender, age, marital status, education employment status, number of living

children, health, proximity to parent, birth order, total household income, and number of siblings.

The endogenous variables were quality of relationship, perceptions of parental health, religiosity, filial reverence and the three filial responsibility dimensions (filial expectation, filial maturity and filial behavior). Procedures similar to those used in testing the parents' models were carried out for the adult children group.

The hypothesis for the adult children models was whether the empirical data fitted the proposed relationships in the theoretical model (Figure 2). The results of the model testing are presented below.

Results of Model A1 for children

Table 18 shows the significant LISREL estimates for all of the children's models in greater detail. Figure 13 shows the significant coefficients for adult children's filial expectation model. Quality of parent-child relationship was predicted significantly by proximity ($t=2.60$, $b=0.21$). The correlation was positive. The further removed geographically the adult children were from their parents, the higher the quality of the relationship with their parents. This result attests to the fact that affection was not affected by distance. It also may indicate that distance lessens the involvement of children with parents which motivates positive

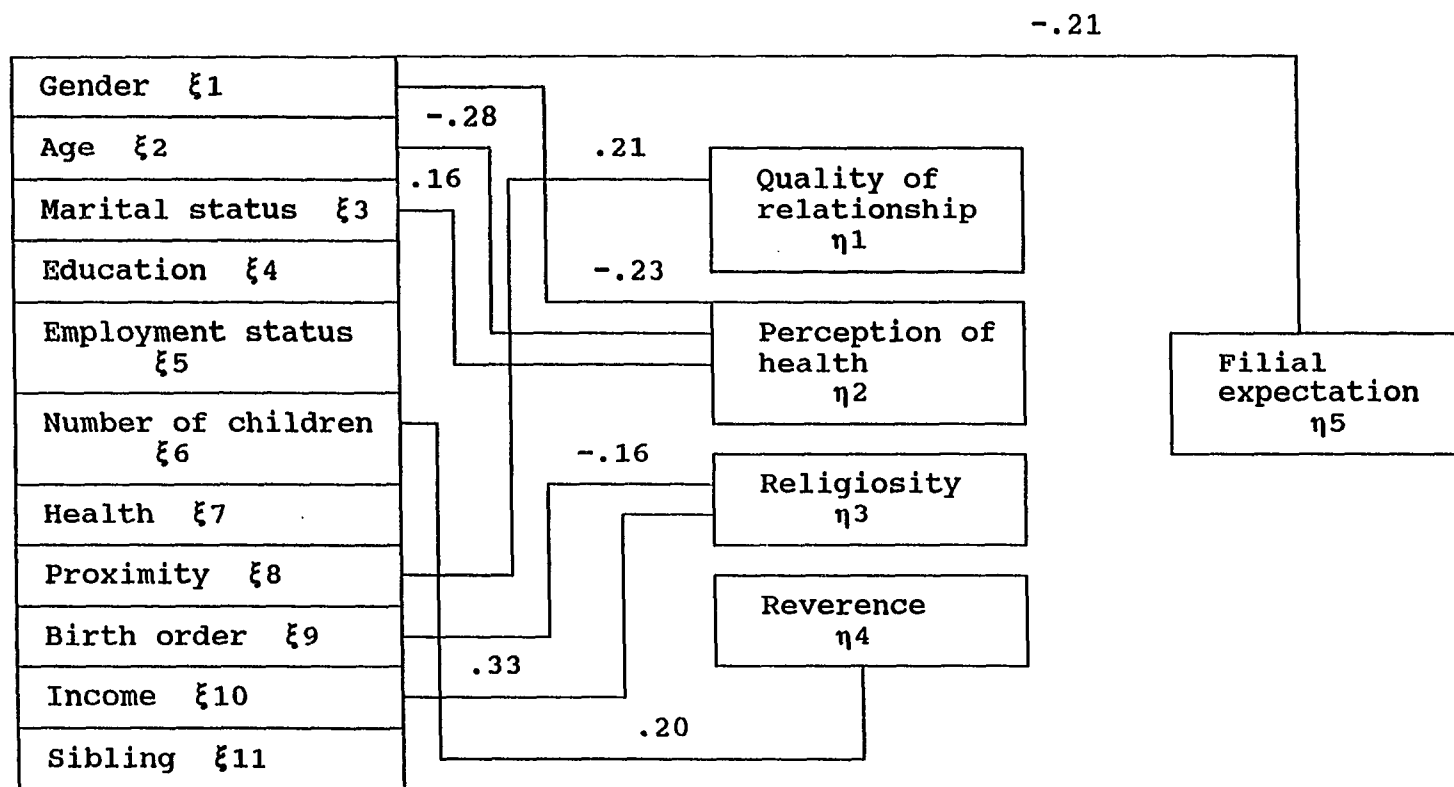


Figure 13. Model A1: Final filial expectation model for children

emotional feelings of adult children for their parents. Cicirelli (1981) indicated conflict was more likely to develop between children and parents who lived near each other than among those who lived farther away. Nevertheless, in this research, conflict was not measured, but it can be speculated that the same situations may exist. However, this result contradicted the findings of Mercier et al. (1988), who indicated that children who were geographically closer expressed a higher quality of the parent-child relationship.

Perception of parents' health was predicted significantly by gender ($t=-2.80$, $b=-0.23$), age ($t=-2.95$, $b=-0.28$), marital status ($t=2.05$, $b=0.16$) and number of siblings ($t=2.28$, $b=0.16$). Adult daughters perceived their parents' health as better than adult sons did. In addition, the older the children, the more likely it was that they perceived the health status of the parents to be poorer, while married adult children perceived their parents' health as better than did nonmarried adult children. Further, parents' health was reported to be better by adult children who had large sibling networks than by adult children who had fewer siblings.

Religiosity related significantly to incomes ($t=3.92$, $b=0.33$) and birth order ($t=-2.05$, $b=-.16$). Adult children in lower birth-order position with higher incomes expressed higher level of religiosity than did adult children who occupied higher birth-order position with lower incomes.

Table 18. Structural models for children, daughters, and sons with significant LISREL estimates

	Filial expectation					
	Children		Daughters		Sons	
	Model A1		Model A1a		Model A1b	
	t-		t-		t-	
	value	USC ^a	value	USC	value	USC
η_1 = Quality of relationship						
Education	--	--	--	--	-2.62	-0.40
Proximity	2.60	0.21	2.30	0.24	--	--
η_2 = Perception of parent's health						
Gender	-2.79	-0.23	--	--	--	--
Age	-2.95	-0.28	--	--	-2.36	-0.37
Marital status	2.05	0.16	--	--	--	--
Proximity	--	--	--	--	-2.09	-0.24
Sibling	2.28	0.16	2.25	0.21	--	--
η_3 = Religiosity						
Employment	--	--	-2.09	-0.22	--	--
Birth order	-2.05	-0.16	--	--	-2.32	-0.26
Income	3.92	0.33	3.01	0.32	3.07	0.40
η_4 = Reverence						
Age	--	--	-2.01	-0.28	--	--
Number of children	2.01	0.20	--	--	--	--
η_5 = Expectation/maturity/behavior						
Gender	-2.35	-0.21	--	--	--	--
Marital status	--	--	--	--	--	--
Employment	--	--	--	--	--	--
Proximity	--	--	--	--	--	--
Birth order	--	--	--	--	--	--
Siblings	--	--	--	--	--	--
β_1 = Quality of relationship	--	--	--	--	--	--
β_2 = Perception of health	--	--	--	--	--	--
β_3 = Religiosity	--	--	--	--	--	--
β_4 = Reverence	--	--	3.08	0.28	--	--

^aUSC = Unstandardized coefficient.

-- = Nonsignificant coefficient.

Filial maturity						Filial behavior					
Children		Daughters		Sons		Children		Daughters		Sons	
Model A2		Model A2a		Model A2b		Model A3		Model A3a		Model A3b	
t-		t-		t-		t-		t-		t-	
value	USC	value	USC	value	USC	value	USC	value	USC	value	USC
--	--	--	--	-2.62	-0.40	--	--	--	--	-2.62	-0.40
2.60	0.21	2.30	0.24	--	--	2.60	0.21	2.30	0.24	--	--
-2.79	-0.23	--	--	--	--	-2.79	-0.23	--	--	--	--
-2.95	-0.28	--	--	-2.35	-0.37	-2.95	-0.28	--	--	-2.36	-0.37
2.05	0.16	--	--	--	--	2.05	0.16	--	--	--	--
--	--	--	--	-2.09	-0.24	--	--	--	--	-2.09	-0.24
2.28	0.16	2.25	0.21	--	--	2.28	0.16	2.25	0.21	--	--
--	--	-2.09	-0.22	--	--	--	--	-2.09	-0.22	--	--
-2.05	-0.16	--	--	-2.32	-0.26	-2.05	-0.16	--	--	-2.32	-0.26
3.92	0.33	3.01	0.32	3.07	0.41	3.92	0.33	3.01	0.32	3.07	0.41
--	--	-2.01	-0.28	--	--	--	--	-2.01	-0.28	--	--
2.01	0.20	--	--	--	--	2.01	0.20	--	--	--	--
-3.70	-0.31	--	--	--	--	-3.36	-0.28	--	--	--	--
--	--	--	--	--	--	--	--	--	--	2.06	0.23
--	--	2.11	0.22	--	--	--	--	--	--	--	--
--	--	--	--	--	--	-2.72	-0.21	--	--	--	--
--	--	--	--	--	--	--	--	2.15	0.23	--	--
-2.06	-0.15	--	--	-2.57	-0.27	--	--	--	--	-2.04	-0.20
--	--	--	--	--	--	2.74	0.19	--	--	4.24	0.41
--	--	--	--	--	--	--	--	-2.18	-0.22	--	--
--	--	--	--	--	--	--	--	--	--	--	--
2.59	0.18	2.57	0.24	--	--	--	--	--	--	--	--

Adult children with more children reported higher filial reverence scores than adult children with fewer children ($t=2.01$, $b=.20$). This result indicated that adult children with children may expect filial reverence from their children in the future, therefore, they presently hold strong filial reverence attitudes.

Only gender was correlated significantly with filial expectation ($t=-2.35$, $b=-0.21$). Female adult children demonstrated higher filial expectation scores than did male adult children.

Results of Model A1a for daughters

Proximity to parents correlated significantly with the quality of the parent-child relationship. The positive correlation ($t=2.30$, $b=0.24$) indicated that the further the geographical distance from the parents' home, the higher the affection the children felt for their parents (See Figure 14). For daughters, living close to parents enhanced the affective quality of the relationships with their parents. This result supports the literature, which has indicated that geographical proximity contributes to a positive evaluation of the parent-child relationship (Mercier et al., 1988).

The availability of siblings correlated positively with perception of parents' health ($t=2.25$, $b=0.21$). Daughters who had large sibling networks perceived their parents' health as

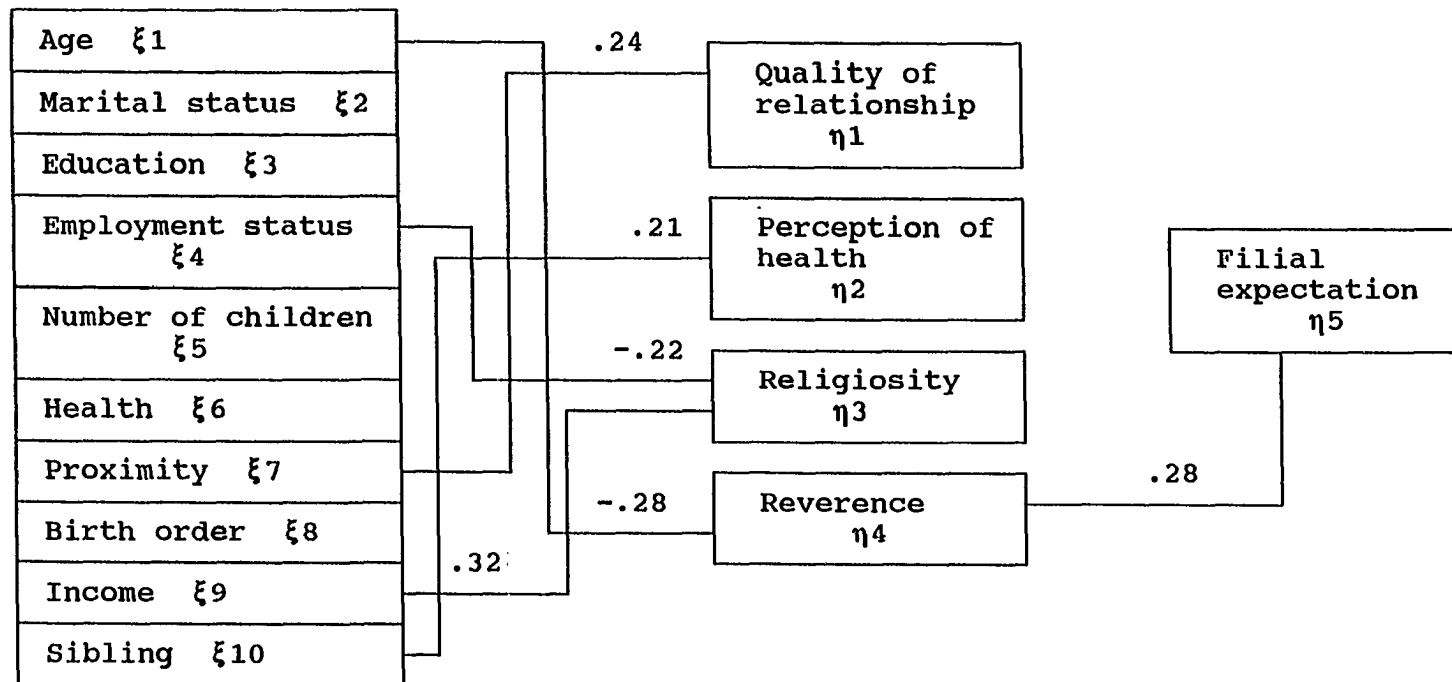


Figure 14. Model A1a: Final filial expectation model for daughters

better than did daughters who had fewer siblings. This result may suggest that having more siblings lessens one's involvement with their parents, and thus contributes to the evaluation of good parental health. On the other hand, this might also indicate the true perception, because in the study the parents were healthy.

Religiosity was predicted significantly by employment ($t=-2.09$, $b=-.22$) and income ($t=3.01$, $b=0.32$). Employed daughters exhibited less religiosity scores than did nonemployed daughters. Employed daughters were more likely not to attend religious lectures than the nonemployed daughters. This result implied that employed daughters might not have time to attend religious lectures.

On the other hand, daughters with higher incomes reported higher religiosity scores than did daughters with lower incomes. Higher income daughters might have helpers who assisted with household chores. Having helpers in the household provided higher-incomes daughters with the time to attend religious lectures.

Daughters' age was related significantly with filial reverence ($t=-2.01$, $b=-.28$). Older daughters demonstrated lower filial reverence attitudes than younger daughters. The potential explanation for this unexpected result may be that older daughters were complacent with their situations. On the other hand, younger daughters would expect high filial

reverence from their own children in the future, therefore, they may hold stronger attitudes of reverence in order to ensure that their children will hold to the norm of filial reverence.

None of the exogenous variables was related significantly to filial expectation. On the other hand, filial reverence was related significantly with filial expectation ($t=3.08$, $b=0.28$). Daughters who expressed a higher level of filial reverence also reported a higher level of filial expectation. Reverence to one's parents is required by all Muslims. Therefore, being aware of filial duties might motivate daughters to expect filial obligations from themselves and their own children in the future.

Results of Model A1b for sons

The quality of the parent-child relationship was predicted significantly by only one indicator. Education produced a moderate negative correlation with the quality of parent-child relationship ($t=-2.62$, $b=-0.40$). The quality of relationship tended to be better for sons who had less education than for sons who were more educated. Figure 15 shows the significant paths in the model. As discussed earlier, sons who were less educated might be dependent on their parents. The dependency relationship may motivate positive sentiments toward their parents.

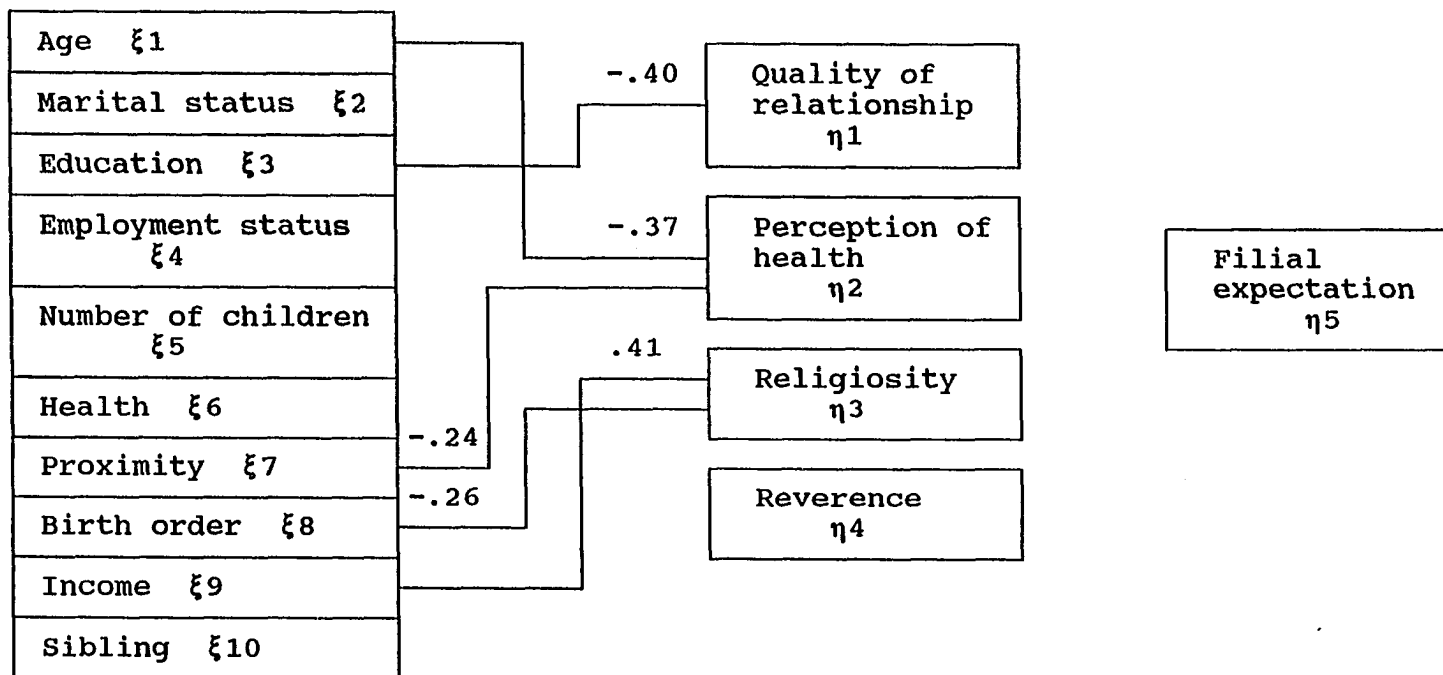


Figure 15. Model A1b: Final filial expectation model for sons

Age and proximity of sons both correlated significantly with sons' perception of parents' health status. The relationships were moderately negative ($t=-2.36$, $b=-0.37$ and $t=-2.09$, $b=-0.24$ respectively). Older sons perceived their parents' health as poorer compared to younger sons. This may not be surprising, as age reflect a history of the parent-child relationships. Older sons may be more aware of the parents' health conditions than are younger sons. Moreover, less proximate sons perceived that their parents' health as poorer than the more proximate sons.

Birth order and income demonstrated significant relationships with religiosity ($t=-2.32$, $b=-0.26$ and $t=3.07$, $b=0.41$ respectively). Older sons indicated higher religiosity scores than did younger sons, and sons with higher incomes reported more frequent attendance at religious lectures than did sons with lower incomes. The explanations for these findings may be that older sons may have more time available to attend religious lectures than do younger sons. Similarly, sons with higher incomes may have greater opportunities to attend lectures than do lower-incomes sons.

None of the exogenous variables correlated significantly with filial reverence. In addition, none of the endogenous variables associated significantly with filial expectation for sons.

Summary

The filial expectation models (Model A1, A1a, and A1b) were similar across all groups of children. The quality of the parent-child relationships was related consistently and positively to proximity for adult children and daughters, but not for sons. In contrast, quality of relationship was associated negatively with education for sons.

The perception of parental health was associated consistently and negatively with age for all children combined, and for sons only. Other indicators produced inconsistent results for all children, daughters, and sons. Marital status was related positively to perception of health for children combined, but were not significant for sons and daughters separately. Number of siblings was consistently and positively related with perception of parents' health for children combined and for daughters, but not for sons.

Religiosity was associated negatively with employment for daughters, and negatively to birth order for children combined and sons-only groups. Further, religiosity associated positively with income for children combined, daughters-only, and sons-only.

Reverence was related positively to number of children income for all children combined and negatively to age for daughters. Filial reverence produced significant positive

relationships with filial expectation for daughters-only and related negatively to gender for all children combined.

Tests of the Filial Maturity Model for Children, Daughters, and Sons

Results of Model A2 for children

The results of Model A2 were similar to the results of Model A1, with the exception of the exogenous variables that predicted filial maturity (Figure 16). Filial maturity was predicted significantly by gender ($t=-3.70$, $b=-0.31$) and number of siblings ($t=-2.06$, $b=-0.15$). Sons reported lower levels of filial maturity than did daughters. On the other hand, the larger the sibling size, the less degree of filial maturity the children demonstrated.

Results of Model A2a for daughters

The predictors of the daughters' filial maturity model were similar to those of the daughters' filial expectation model (Model A1a). Figure 17 presents the significant paths in the final model. Proximity was correlated positively with quality of the parent-child relationship ($t=2.30$, $b=0.24$). The further the geographical distance of the daughters from their parents, the higher the reported quality of the parent-child relationships.

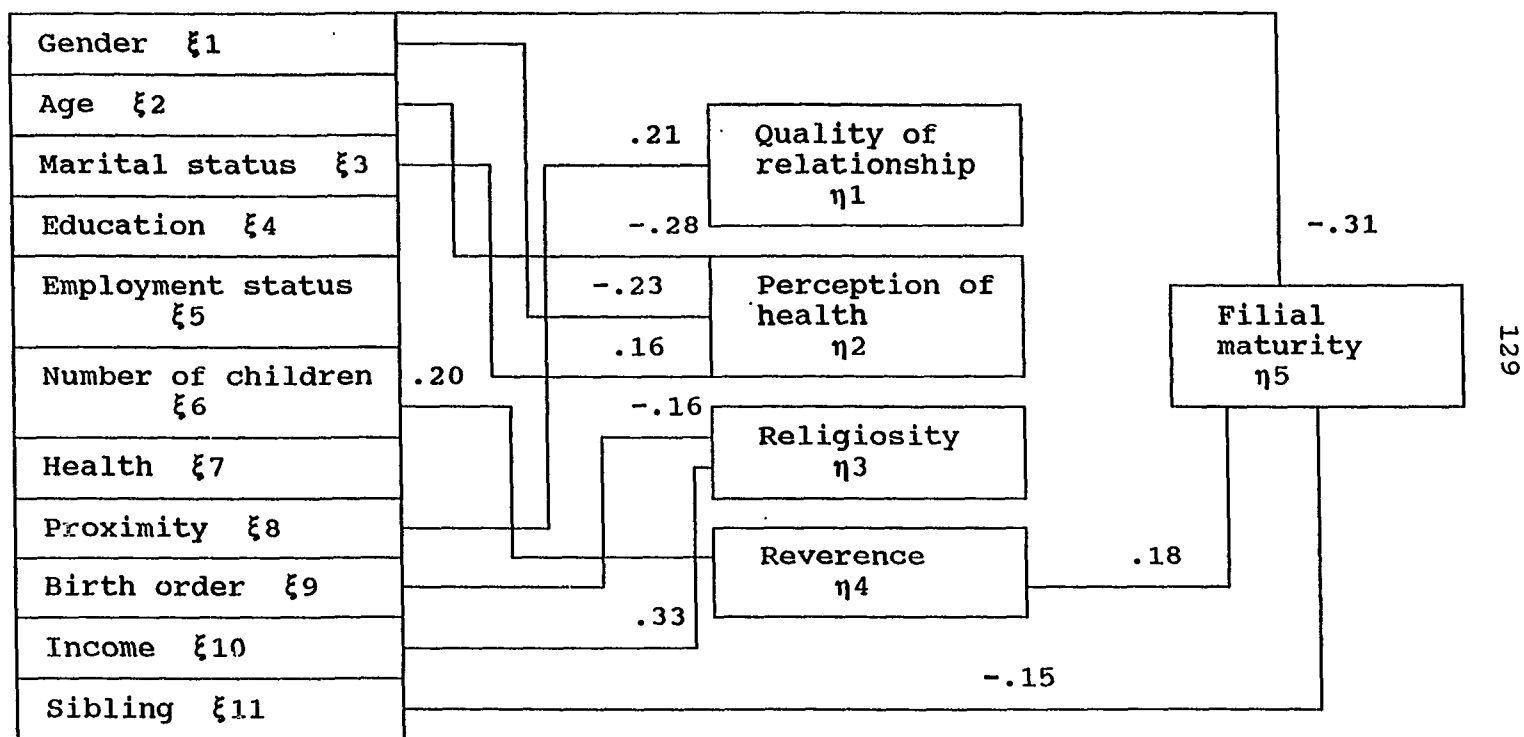


Figure 16. Model A2: Final filial maturity model for children

The number of siblings indicated a significantly positive correlation with perceptions of parents' health ($t=2.25$, $b=0.21$). Daughters with more siblings perceived better parental health than did daughters with fewer siblings. A possible explanation for this outcome is that daughters in the larger sibling networks are less involved with their parents, health. On the other hand, daughters with fewer siblings might be more involved with their parents, and thus may have been more aware of their parents' health conditions which may lead to the more favorable perceptions of parental health.

Daughters' employment status associated positively and significantly with filial maturity ($t=2.11$, $b=.22$). Employed daughters demonstrated higher attitudes of filial maturity than did nonemployed daughters.

Results of Model A2b for sons

The model, with only significant paths shown is presented in Figure 18. Out of the ten exogenous indicators, only education was a determinant of the quality of the parent-child relationships in the filial maturity model ($t=-2.62$, $b=-0.40$). The correlation was negative. The quality of relationship between parent and child was better for less-educated sons than for better-educated sons. This finding indicated that better-educated sons probably have more resources and are not as dependent on their parents. Better-educated sons may lead

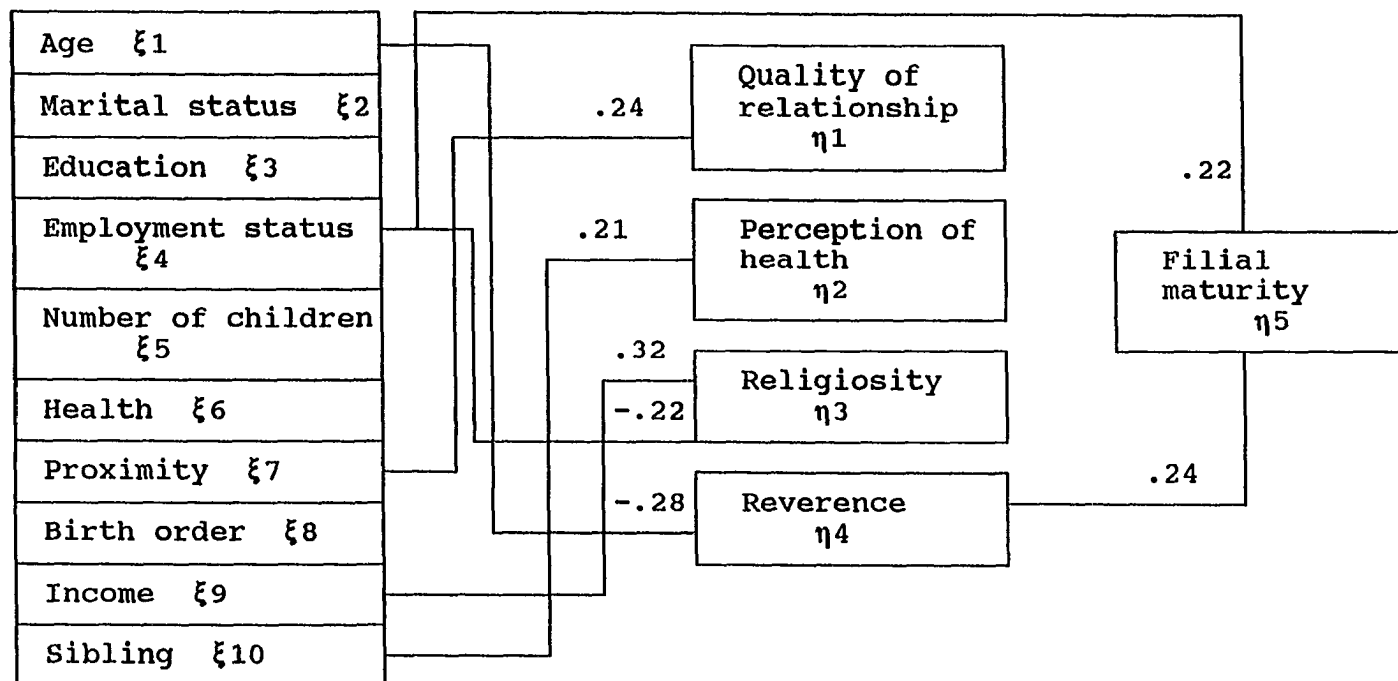


Figure 17. Model A2a: Final filial maturity model for daughters

different life styles than their parents, which may influence the quality of the relationship with their parents. Further, in the Malay community, sons are heavily invested emotionally in their wives, which might modify the quality of the relationship with their parents.

Age and proximity were significant negative predictors of the perception of the parental health conditions ($t=-2.36$, $b=-.37$ and $t=-2.09$, $b=-0.24$, respectively). Older sons who lived closer to their parents perceived less favorable parental health than did younger sons who lived farther away. Moreover, older sons would have parents who were much older and may have more health problems than parents of younger sons. Being more proximate, older sons would interact more and were more aware of their parents' health conditions than younger sons.

The indicators for religiosity were similar to that of Model A1b. Sons who were higher in birth-order position reported lower attendance at religious lectures than sons who occupied lower birth-order position ($t=-2.32$, $b=-.26$). Sons who reported higher incomes indicated higher religiosity scores than did sons who reported lower incomes ($t=3.07$, $b=.41$). This result reflected that the older sons attended more religious lectures than younger sons and older sons may have greater opportunities to attend religious lectures than

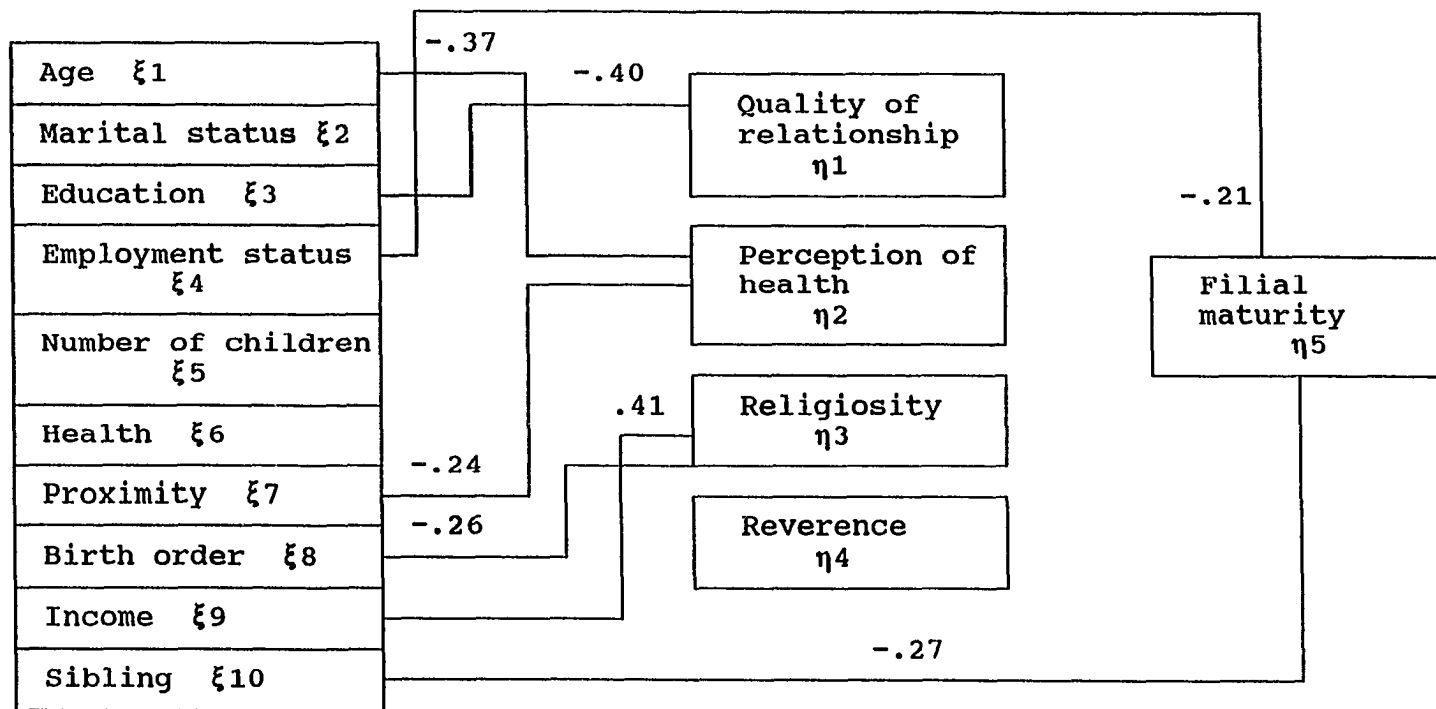


Figure 18. Model A2b: Final filial maturity model for sons

younger sons. Nevertheless, this implied that older sons were more religious than younger sons.

Two exogenous variables indicated significant relationships with filial maturity scores. Filial maturity scores related negatively with sons' employment status ($t=-2.06$, $b=-.21$) and number of siblings ($t=-2.57$, $b=-.27$). Employed sons with larger sibling network exhibited lower filial maturity scores than did nonemployed sons with lower sibling network. Filial maturity was a measure of attitudes of parent-child dependency. This result might indicate that, at least for sons, the attitudes of dependency were modified when they were employed and having siblings.

Summary

Quality of relationship was related positively to proximity for children combined and daughters. However, quality of relationship was related negatively to education for sons.

Perception of parents' health was related negatively to age for children combined and sons-only. Further, the quality of the parent-child relationships was related negatively with gender and positively to marital status for children combined. In addition, perception of parents' health was related positively to number of siblings for children combined and

daughters-only, while perception of parental health was related negatively to proximity for sons-only group.

Religiosity was related negatively to employment and positively to income for daughters. In contrast, religiosity was related negatively to birth order and related positively to income for children combined and sons-only groups.

Filial reverence was related negatively to age for daughters-only and positively to number of children for children combined. On the other hand, filial maturity was related negatively to gender and number of siblings for all children. Further, filial maturity was associated positively with employment status for daughters-only, but related positively to employment status for sons-only group. In addition, reverence was associated positively with filial maturity for children together and daughters-only.

To recapitulate, filial maturity was determined by gender, number of siblings, and reverence for all children, while employment status and filial reverence were predictors of filial maturity for daughters. The determinant of filial maturity for sons were number of siblings and employment status.

Tests of the Filial Behavior Model for
Children, Daughters, and Sons

Results of Model A3 for children

Figure 19 shows the significant paths in Model A3. One out of the eleven exogenous variables was significant determinant of the quality of the parent-child relationships. Children's proximity to their parents associated positively with the quality of the parent-child relationships ($t=2.60$, $b=.21$).

The same exogenous variables that were related significantly to adult children's perception of parental health and religiosity in Model A1 and Model A2 also were significant in Model A3. The adult children's perceptions of parental health were related negatively to gender ($t=-2.79$, $b=-0.23$), age ($t=-2.95$, $b=-0.28$) and positively with marital status ($t=2.05$, $b=0.16$) and sibling size ($t=2.28$, $b=0.16$). Younger male children perceived parental health less favorably than did older female children. On the other hand, married children with more siblings perceived their parents' health as better than did unmarried children with fewer siblings.

Income was related positively with religiosity ($t=3.92$, $b=0.33$) and negatively with birth order ($t=-2.05$, $b=-.16$). Children who possessed higher incomes expressed higher religiosity scores than did children with lower incomes. In addition, children who occupied lower birth-order position

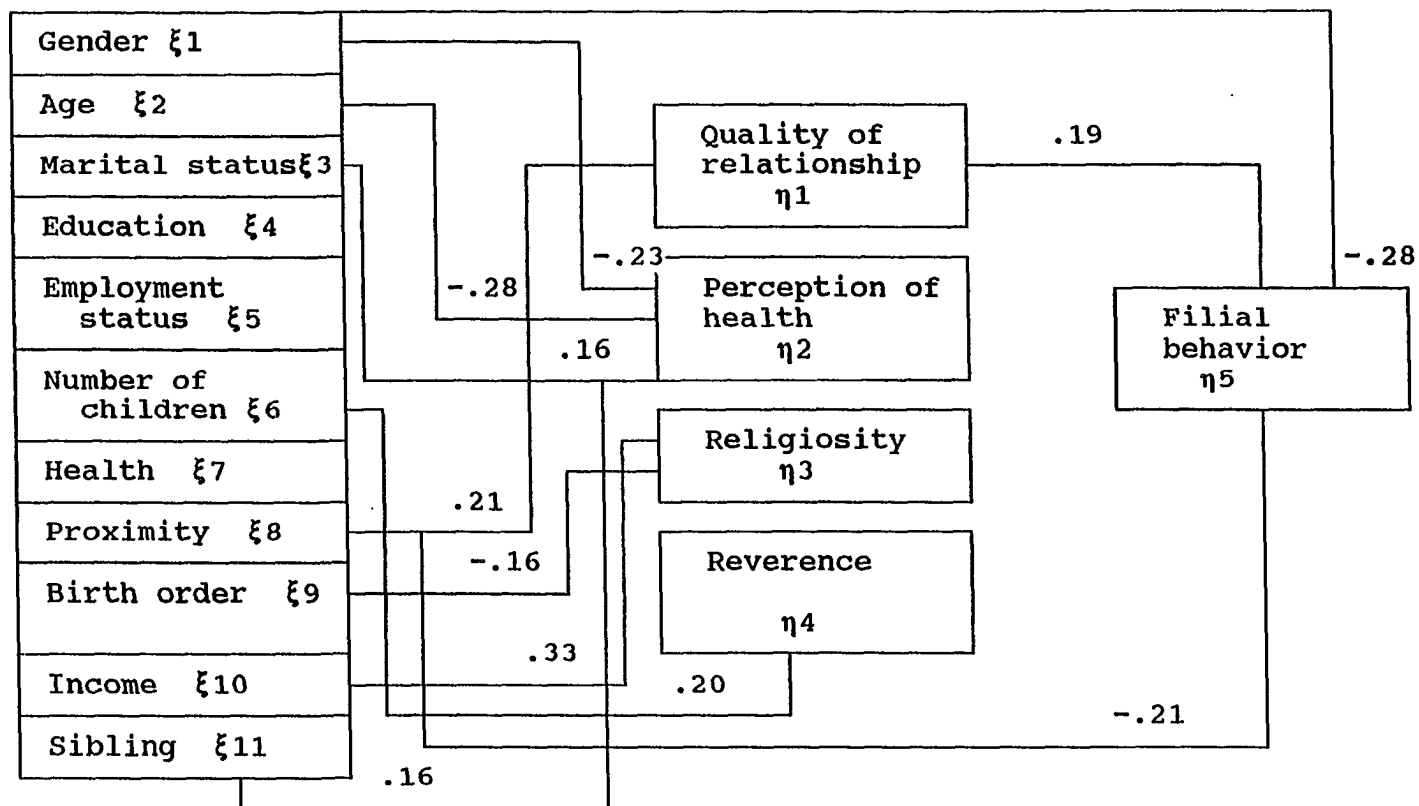


Figure 19. Model A3: Final filial behavior model for children

indicated higher religiosity scores than did children who occupied higher ordinal position.

One exogenous indicator was related significantly to filial reverence for children. Number of children was related positively with filial reverence ($t=2.01$, $b=.20$). Adult children with more children exhibited stronger attitudes of filial reverence than did adult children with fewer children.

Gender and proximity were related significantly with filial behaviors ($t=-3.36$, $b=-0.28$ and $t=-2.72$, $b=-0.21$, respectively). Male children reported lower a level of filial behaviors than were female children. This result supported findings in the literature, where several investigators had reported that male children were less involved in filial task performance than did female children (Coward & Dwyer, 1990; Houser et al., 1985; Horowitz, 1985; Spritze & Logan, 1990a, 1990b). However, this finding may contradict the teachings of the Koran, which stresses the responsibilities of male children to care for their aged parents. It might be that male children interpreted their filial duties as being more at the supervisory level, and may regard the actual tending to parental needs as inappropriate for them. As reported in the literature, male children usually involved their wives in performing their filial responsibilities (Matthews & Rosner, 1988). Thus, it seems that cultural traditions play greater roles than religious traditions when it comes to filial duties

among male children. However, the society expect male children to care for the elderly in old age.

On the other hand, less proximate children demonstrated more filial behaviors than did more proximate children. This finding contradicted the literature, which indicated that more proximate children were more involved in filial duties than were less proximate children (Finley et al., 1988; Litwak & Kulis, 1987; Schoonover et al., 1988; Soldo & Myllyluoma, 1983; Stone et al., 1987; Walker & Thompson, 1983).

Nevertheless, the possibility might be that the interactions with proximate children were so frequent that they were taken for granted. Nonetheless, having a higher quality of the parent-child relationship was related to a higher level of filial behaviors ($t=2.74$, $p=0.19$). Children who perceived better quality of parent-child relationships were more involved in filial behaviors than did children who perceived lower quality of parent-child relationships.

Results of Model A3a for daughters

Model A3a produces results comparable to those of Model A1a and Model A2a for predictors of quality of the parent-child relationship, perception of parental health, and religiosity. Figure 20 provides a schematic drawing of the significant coefficients. Proximity to parents was the only significant predictor of the quality of the parent-child

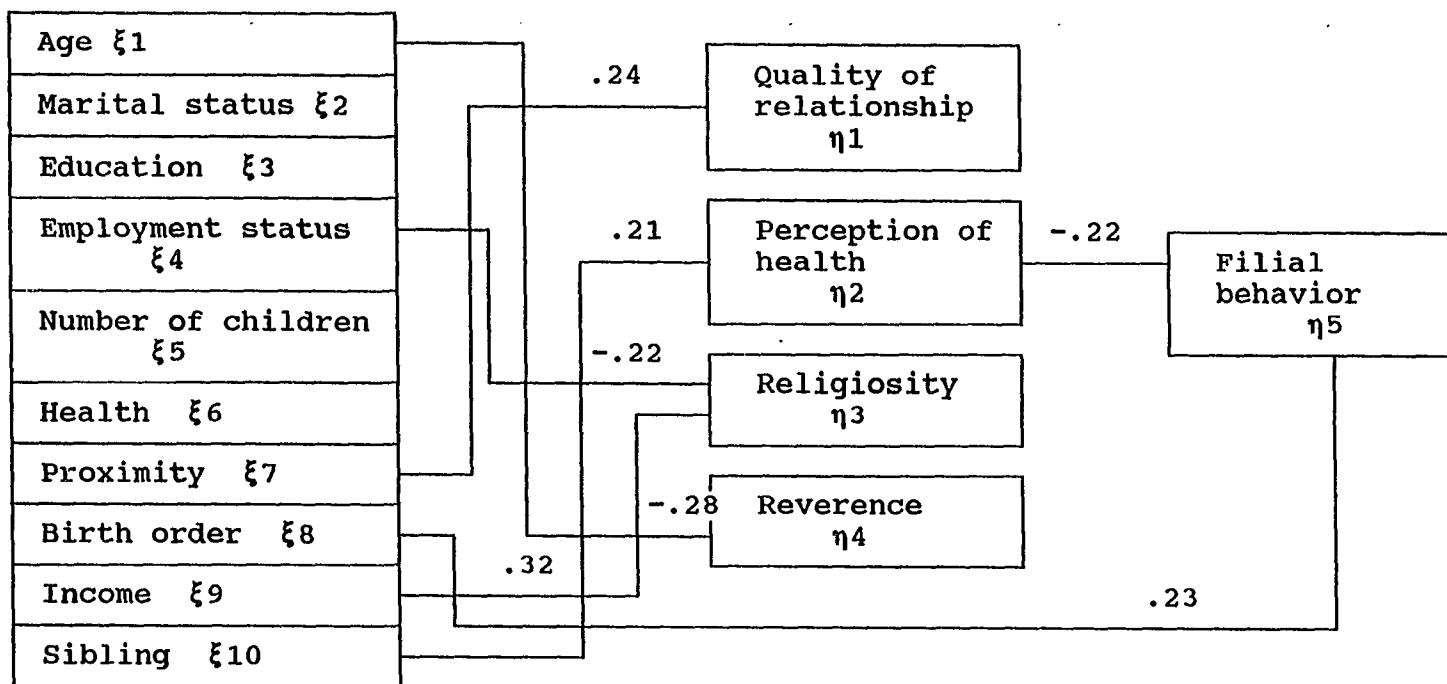


Figure 20. Model A3a: Final filial behavior model for daughters

relationship ($t=2.30$, $b=0.24$), whereas, number of siblings significantly predicted perception of parents' health ($t=2.25$, $b=0.21$)

Religiosity was associated significantly with employment status ($t=-2.09$, $b=-0.22$) and income ($t=3.01$, $b=0.32$). The correlations were also similar to those for Model A2a.

Employment status was associated negatively and significantly with filial reverence ($t=-2.01$, $b=-.28$) and birth order was associated positively with filial behavior ($t=2.15$, $b=.23$). Older daughters were less likely to be involved in filial behaviors than did younger daughters. The perception of parental health had a significant relationship with filial behavior ($t=-2.08$, $b=-0.22$). As expected, daughters who perceived parental health less favorably were more involved in filial behaviors than were daughters who perceived that their parents were in better health. This finding confirmed results reported in the literature (Horowitz, 1985; Stone et al., 1987; Walker et al., 1990).

Results of Model A3b for sons

The quality of the parent-child relationship was related significantly and negatively to education ($t=-2.62$, $b=-0.40$). Further, age ($t=-2.36$, $b=-0.37$) and proximity ($t=-2.09$, $b=-0.24$) correlated significantly with perceptions of parental

health. These results duplicated the findings of Model A2b. Figure 21 shows the significant paths in the model.

As with Model A1b, birth order and income correlated significantly with religiosity ($t=-2.32$, $b=-0.26$ and $t=3.07$, $b=0.41$ respectively). Sons who occupied lower birth-order positions reported higher religiosity than did sons who occupied higher birth-order positions. Similarly, sons with higher incomes reported higher religiosity scores than lower incomes sons.

Marital status of sons related positively ($t=2.06$, $b=.23$), while number of siblings ($t=-2.04$, $b=-.20$) correlated negatively with filial behaviors. Married sons were more involved in filial tasks than were the unmarried sons.

On the other hand, the older the sons, the less involved they were with filial behaviors. This findings contradicted the Lopata's (1973) widowhood study, where she found younger sons were less involved in filial support of their widowed mothers. However, when a son has siblings, filial behavior involvement with parents is reduced. It may be that in the sons' sibling network, female siblings were present who maintained higher levels of filial behaviors than did their male siblings. In addition, the siblings may have helped each other in performing filial tasks, thereby reducing responsibility for the sons. Further, Spritze and Logan (1991) reported that number of siblings was associated

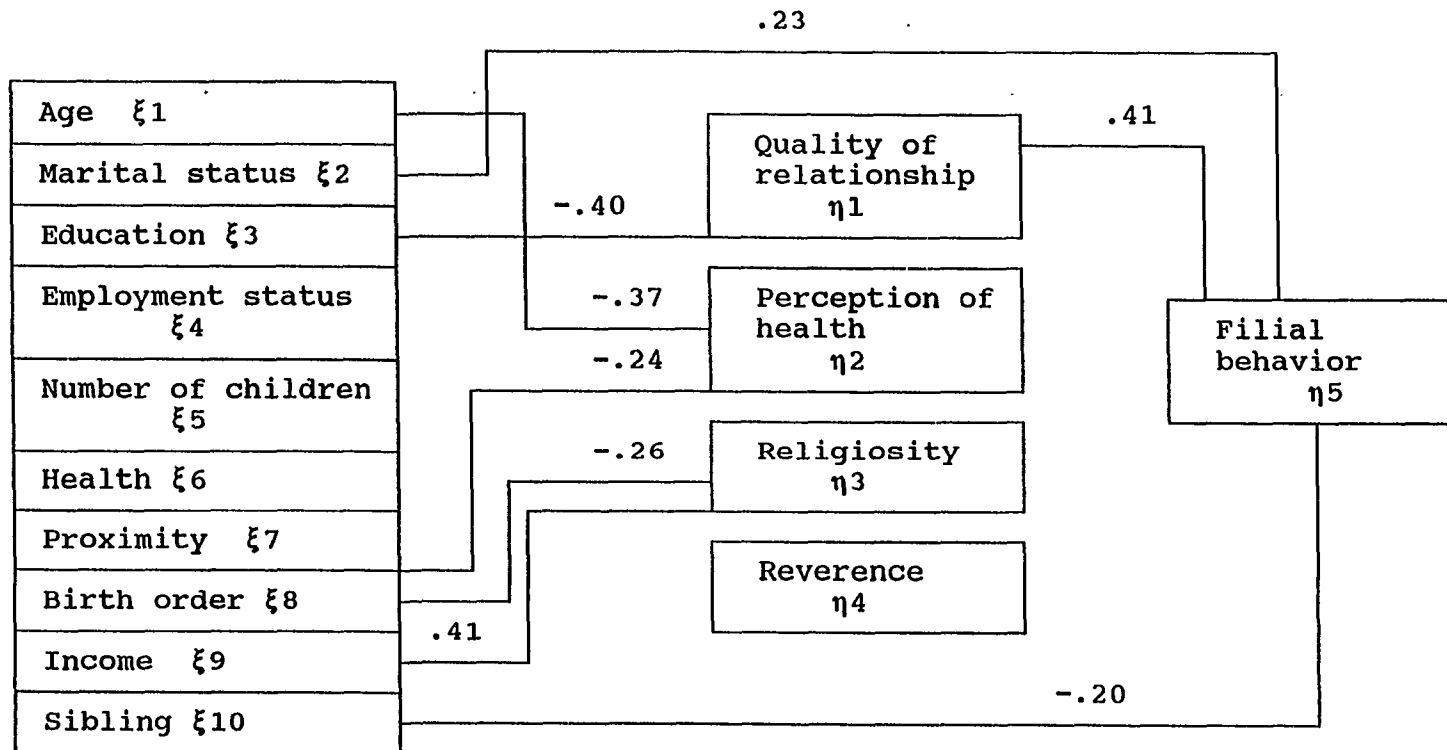


Figure 21. Model A3b: Final filial behavior model for sons

negatively with the number of visits and telephone calls between adult children and their parents.

Summary

In the filial behavior model, quality of relationship was related positively to proximity for all children combined and for daughters separately, and negatively with education level for sons.

Perception of parents' health was associated negatively with gender and positively with marital status for children combined. Age was related consistently and negatively to perception of parental health for all children and for sons. In addition, perception of parental health was positively related to number of siblings for all children and daughters separately.

There were inconsistent predictors of religiosity for children, daughters, and sons. Religiosity was associated negatively with employment status for daughters only, while birth order was associated negatively with religiosity for all children and for sons only. Nonetheless, religiosity was associated positively with income for all children, daughters and sons.

Reverence was associated positively with number of children for all children and negatively to age for daughters

separately. No indicators were significant with filial reverence for sons.

Filial behavior was correlated negatively with gender and proximity, and positively to quality of relationship for all children combined. On the other hand, filial behavior was associated positively with birth order and negatively with perception of parental health for daughters only. For sons, filial behavior was positively related to marital status and quality of parent-child relationships, and negatively to number of siblings.

The summary statistics for the adult children, daughters, and sons are presented in Table 19. The goodness of fit indices for the adult children model were high in all three filial models. The adjusted goodness of fit values for all of the models were low, which may indicate a lack of fit of the model to the data. The adjusted goodness of fit is sensitive to the number of parameters in the model. In addition, the low values might be a function of sample size. In this study the sample size was small. Therefore, the combined effect of too many parameters and small sample size contributed to the relatively low values of the adjusted goodness of fit indices.

Nevertheless, the values of root mean square residual (RMR) for each of the nine children's models were below .03, indicating a good fit. It can be concluded that for all of the children's models the assessment indices were good, with

Table 19. Comparison of summary statistics of children's, daughters', and sons' filial expectation, filial maturity, and filial behavior models

	Filial expectation			Filial maturity			Filial behavior		
	Model A1	Model A1a	Model A1b	Model A2	Model A2a	Model A2b	Model A3	Model A3a	Model A3b
	Child- ren	Daugh- ters	Sons	Child- ren	Daugh- ters	Sons	Child- ren	Daugh- ters	Sons
	N=188	N=104	N=84	N=188	N=104	N=84	N=188	N=104	N=84
Goodness of fit index	.987	.973	.988	.987	.973	.988	.987	.973	.988
Adjusted goodness of fit	.703	.464	.769	.703	.464	.769	.703	.464	.769
Root mean square residual	.024	.037	.022	.024	.036	.022	.024	.036	.024
χ^2	17.960	18.740	7.100	17.960	18.740	7.100	17.960	18.740	7.100
p-value	.006	.005	.312	.006	.005	.312	.006	.005	.312
R^2	.453	.517	.560	.502	.529	.635	.507	.548	.613
$R^2(\eta_1)$	.079	.121	.141	.079	.121	.141	.079	.121	.141
$R^2(\eta_2)$	.177	.192	.187	.177	.192	.187	.177	.192	.187
$R^2(\eta_3)$	.166	.203	.232	.166	.203	.232	.166	.203	.232
$R^2(\eta_4)$	.073	.072	.122	.073	.072	.122	.073	.072	.122
$R^2(\eta_5)$	.098	.168	.125	.200	.189	.268	.188	.198	.327
df	6	6	6	6	6	6	6	6	6

the exception of the adjusted goodness of fit index. This supports Joreskog & Sorbom's (1986) suggestion that the fit indices measure the overall fit of the models to the data, but do not express the quality of the models.

For the models for all adult children (Model A1, Model A2, and Model A3), the variables in the model jointly explained close to 50% of the variance, which was lower than the variance explained by the separate daughters' models (Model A1a, Model A2a, and Model A3a) and sons' models (Model A1b, Model A2b, and Model A3b).

Analyzing the separate structural equations with the quality of relationship as the outcome variable (η_1), the correlations were strongest for sons and lowest for all children. When perception of parental health (η_2) was the outcome variable, the daughters' models produced the strongest variance explained. Additionally, sons' squared multiple correlation was highest with religiosity (η_3) as the outcome variable.

Among the three filial expectation models (Model A1, Model A1a, and Model A1b), the daughters-only result produced the strongest coefficient. On the other hand, the sons-only analyses produced strong coefficients for filial maturity and filial behavior models. In the all children models (A1, A2, and A3), the strongest variance explained was in the filial maturity as the outcome variable.

Based on the assessment of fit indices, the combined children and the daughters-only models indicated minimally adequate fits, while the sons' models were better fitted.

CHAPTER 5. SUMMARY AND CONCLUSIONS

The summary chapter provides (1) a brief summary of the research, and (2) conclusions and implications. It also offers suggestions for future research.

Summary of Research

The aim of this study was to investigate the correlates of filial responsibility among Malay families in Malaysia. The data for the study were derived from 198 aged parents and 188 adult children who were geographically proximate to their parents. The data were gathered through personal interviews.

Three separate models of filial responsibility (filial expectation, filial maturity, and behavior) were developed separately for parents and children. In addition, separate analyses of the three filial responsibility models were conducted on the mothers-only, fathers-only, daughters-only, and sons-only groups. Eighteen structural equation models were estimated to achieve that objective.

Conclusions and Implications

Findings from the study have several important implications for understanding intergenerational relationships in the Malay family. For fathers with higher incomes, the quality of the relationship was poorer than for fathers with

lower incomes. But, for mothers the opposite was true. This implies that lower-income fathers were closer to their children. Lower-income fathers may have to maintain good relationships with their children because their children may be the only source of support for them in old age. Therefore, they have to maintain good relationships to ensure assistance in the future.

This result may have serious implications, as many of the programs developed in the New Economic Policy for Malaysia have focused on income-generating activities. Therefore, there need to be more programs related to social issues to strengthen family relationships. There is a need to balance economic needs and social needs in the future planning of programs, as economic activities do not guarantee emotional support. Ong (1990) indicated that the unintended implication of the New Economic Policy for Malay family is the change in the parent-child relationships and gender relations created because of the outmigration of the young from the villages. Moreover, Young and Kamal Salih (1987) discussed the new transformation of Malay family in modern Malaysia in terms of its function and structure. They stressed that the state involvement through economic policies provided new opportunities for Malays in educational and economic spheres that affected the Malay family and created the expansion of the Malay middle class. Consequently, the structural change

directly or indirectly affected, the ideological, cultural norms and practices, and the socialization process of children in the Malay family.

For mothers, the quality of parent-relationship was influenced negatively by age. The quality of relationship deteriorates with age. This result has important implications with respect to care of older mothers. It is a well-known fact that the life expectancy of women is longer than for men, and in their old age these women may need assistance from their children to care for them. When they do not have good relationships with their children, neglect and abuse may occur if the caregiving activities were for long duration and if they happened to be given by children with whom the mothers did not have good relationships in the first place.

Moreover, the results showed that mothers' filial expectations were related negatively to marital status, suggesting that married mothers do not expect filial help from their children. As reported in ESCAP (1989), twice as many women as men did not have anybody to care for them.

Filial maturity was related negatively by health for fathers and positively by filial reverence for mothers. For fathers, the attitudes of filial maturity were higher when they did not have health worries. This outcome reflects the feeling of being able to be depended upon, if one does not have other worries to be concerned with. Similarly, for

mothers, having attitudes of filial reverence motivated them to feel that they were available to provide assistance.

The adult children's quality of parent-child relationship was related positively to proximity in daughters and to education in sons. For daughters, living close to their parents promoted better quality of the parent-child relationships. However, as the results indicated, better-educated children did not live closer to their parents. Daughters who lived closer to their parents were less educated and therefore may have fewer resources than do their more educated counterparts. Consequently, the more proximate children will be the ones more likely to take care of their parents in time of need.

What may happen in the future, when family size is smaller and children are more educated and might not live in the same locality? Parents may not have children living in the vicinity of their villages, and thus will need to depend on other support systems to assist them. Presently, programs to support the aged are lacking. It may be time for society to respond to impending issues related to the aging of the population.

Our data have indicated that the filial responsibility models seem to fit better for parents than for the adult children. In the adult children models several variables need to be dropped in order to produce a better fit of the models

to the data. Too many indicators, as well as a comparatively small sample, contribute to the poor fit. Modification of the models would produce a more parsimonious model that provides a better fit. Nevertheless, the hypotheses for the study were failed to be rejected, indicating that the models proposed had adequate fit.

Further, the findings in the study lend support to the theoretical basis of the study. Parents' and children's attachment, as reflected in the quality of parent-child relationships affected filial responsibility in the Malay families. In addition, filial reverence and religiosity also influenced filial responsibilities. Therefore, relational morality and contextual variables were important in determining filial responsibilities.

The cross-cultural nature of the research may account for the results that are inconsistent with Western research literature. However, the results do reflect some of the cultural conditions of intergenerational relationships. The findings may be helpful in formulating further theoretical developments concerning filial responsibility. Religiosity and filial reverence have not been used as correlates of filial responsibility, yet, the results from this study indicated the potential association of these variables to filial responsibility.

Nevertheless, the sample size of the present study may have limited some of the conclusions that could be drawn on the basis of the statistical evidence. Although many significant relationships could be detected, a bigger sample size would provide sufficient power to detect more evidence of significance.

Findings from the filial responsibility study have implications for the care of the aged in Malaysia. By studying the correlates of filial responsibility, strategies can be developed which use these factors as baseline information for the design of policies related to care of the elderly.

The results of study indicated that Malay family structure has changed. The family structural change may influence the potential of family members to become caregivers of their elderly members, even though, the adult children may hold strongly to the concept of filial responsibility. As discussed earlier, residential mobility was high for young and educated adult children, meaning that elderly family members will be left in the rural villages. In order for elderly family members to be cared for by their adult children, policies and programs need to be developed to lessen the outmigration of the young and educated children from their hometowns. Programs that developed in-situ projects might be an answer.

Further, with the lengthening of the life expectancy of Malaysians, intergenerational relationships may need new definitions. The possibility of the creation of "women in the middle" syndrome may developed in the future. In addition, the implementations of filial responsibility tasks may be modified to suit the new environment.

The aging of the population is both a triumph and challenge for modern government to face, especially in the third world countries where the rate of aging is faster than the western nations. Even though the issues of the aging of the population may not be a priority, it still needs to be acknowledged by the society so that the development of aged population will not create social problems to the society. Nevertheless, creative and innovative programs and or policies in line with national goals need to be created so that family members can perform their expected functions in the midst of the changing environment. For example, respite care ought to be developed to supplement and or complement families to care for their aged members. The formulations of policies related to caregiving must take into account the present family situations. Policies and programs should not be based on the idealized family situations of the past when the society allegedly held more strongly to filial responsibility norms.

Recommendations for Future Research

The research conducted was an attempt at studying filial responsibility in the Malaysian context. The experience of conducting the research was challenging to the investigator. The first challenge was the research instrument. Using a Likert scale instrument was quite a problem with the elderly. They were not able to evaluate distinctly the five response choices. An attempt was made to write the responses on cards, yet this was not successful. In the end, the items were changed into a three-category Likert format. This problem was not faced with the adult children group. But, for comparison purposes, the three-point Likert scale was adopted for the adult children. More creative methods need to be used to elicit meaningful variations in responses.

In this study, religiosity was a measure of attendance at religious lectures. Granted that the concept of religiosity was not developed fully in this study, religiosity did show potential to correlate with filial responsibility.

The researcher felt that measurements of religiosity used in the Western countries, such as affiliation with a religious organization and participation at church, may not be suitable for a homogenous study population. Moreover, attendance at mosques is not a must for all Muslims. For example, attendance at mosques for prayers is encouraged for males but not for females.

Further, the researcher could not ask the number of times the respondents engaged in daily prayers. This approach either would have offended the respondents or would have led them to respond in socially desirable ways. Therefore, in the interest of uniformity and parsimony of the research instrument, a neutral measure was used. Nevertheless, a better measure needs to be developed to assess religiosity in a homogenous society. It is possible that such a measure cannot be solicited from a survey instrument, but may be better developed in observational research where religious behaviors and practices are recorded.

The design of the study had inherent weaknesses. For example, the research was cross-sectional with a small sample size, and the sample was purposively selected. Therefore, generalizeability of the data is limited to populations having similar characteristics. In order to elicit greater generalizeability of findings, more representative sampling procedures should be adopted. The phenomenon investigated in this research has a long history of development in the lives of the respondents. Hence, cross-sectional study may not be the best research strategy to use. Fry and Keith (1980) indicated that data from brief interviews tend to be distorted toward the ideal. They suggested that to understand aging in a cultural context, "emic, holistic, qualitative research, without a normative bias" (pg. 7) should be adopted.

Filial reverence and religiosity have not been used to investigate filial responsibility. These indicators should be considered for future research. In addition, filial maturity was another aspect that was developed for the study. The level of reliability for this construct was quite respectable; however, the concept may need to be retested and developed further for use in the future.

Investigators interested in studying intergenerational relationships may need to investigate family issues from more than one informant per family, as this research produced different results for different respondents.

The research conducted was for only one ethnic group in Malaysia. Probably similar research ought to be conducted on other ethnic groups, to examine other predictors of filial responsibility.

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ACKNOWLEDGEMENTS

I have many people to say "Thank you" to during my graduate work at Iowa State University. I am honored that Dr. Craig Allen, Dr. Pat Keith, Dr. Mack Shelley, and Dr. Mary Winter could serve on my committee. Their professionalism, dedication, and commitment in their work have been an inspiration for me to emulate.

My major professor, Dr. Joyce Mercier, was always available for consultation, and through her guidance the process of completing the dissertation was achieved in time. Her guidance and mentorship will always be treasured.

My appreciation is extended to my sponsors, the Government of Malaysia and my employer, the Universiti Pertanian Malaysia, for granting me the study leave to upgrade my training, and to my five enumerators, Rosdi, Anuar, Billy, Kamil, and Rahim, without whose help I would still be doing my interviews.

To my dear friend Shirley M. Huck, without her crash course on LISREL I would still be struggling with the program. Through the years, our friendship has developed, and you know how much your presence and assistance means to me. Words cannot express my gratitude to you.

To my loving husband, Mat, who gave me permission to study, although knowingly he has to suffer our temporary

absence. Without his love, understanding, and constant encouragement I would not have endured graduate school. My children, Ahmad Nasrin and Alyaa Shazwina, have been very patient and understanding with mama's "kerja sekolah" and do not mind being second to mama's school work.

To my mother, who all along believed I could go through graduate work amidst all the challenges I have to face. Her belief has been an inspiration for me to work.

Milah has been great as my friend, helper, and sounding board. Without her my life as a student mother would be chaotic.

Last, but not least, my gratitude extends to the villagers in Beranang for sharing part of their life with me. Their sincere cooperation made the study possible.

And I thank God for giving me the patience and sound mind to live through graduate work.

APPENDIX A: RESEARCH INSTRUMENT IN ENGLISH AND BAHASA
MALAYSIA

CONFIDENTIAL

SERIAL NO. _____

TITLE OF STUDY: CORRELATES OF FILIAL RESPONSIBILITY

PARENT INSTRUMENT

IDENTIFYING INFORMATION:

Name: _____

Address: _____

Village: _____

Subdistrict: _____

Gender: 0-- Female 1-- Male

Age: _____

Interviewer name: _____

Date: _____

Time start: _____ Time end: _____

The above information will permit the identification of respondents. It will be used only by persons engaged in the study and will not be disclosed to others for any other purposes).

(Interviewer, observe and circle housing information)

TYPE OF HOUSING:

1. SINGLE STOREY BUNGALOW
2. DOUBLE STOREY BUNGALOW
3. SINGLE STOREY SEMI-DETACHED HOUSE
4. DOUBLE STOREY SEMI-DETACHED HOUSE
5. SINGLE STOREY TERRACE HOUSE
6. DOUBLE STOREY TERRACE HOUSE
7. FLAT

HOUSING MATERIAL:

1. BRICK
2. WOODEN
3. MIXED BRICK/WOODEN

I would like to ask some background information about yourself to help in the interpretation of the results.

1. What is your present marital status?
 1. MARRIED
 2. WIDOWED
 3. DIVORCED
 4. SEPARATED
 5. NEVER MARRIED

2. If married, is your spouse presently employed?
 0. NO (Go to question no. 3)
 1. YES (Go to question no. 4)

3. Have your spouse ever worked?
 0. NEVER WORKED
 1. WORKED BEFORE

4. What is your spouse's present (or last previous) type of occupation?

5. Are you presently employed?
 0. NOT EMPLOYED (Go to question no. 6)
 1. EMPLOYED (Go to question no. 7)

6. Have you ever worked before?
 0. NEVER WORKED
 1. WORKED BEFORE

7. What is your present present (or last previous) type of occupation?

8. Can you read the newspaper?
 0. NO
 1. YES

9. If no, why?

10. Can you write letter?

- 0. NO
- 1. YES

11. If no, why? _____

12. Have you ever attended school?

- 0. NEVER ATTEND
- 1. ATTEND

13. What is the highest level of school did you attend?

- 1. RELIGIOUS SCHOOL
- 2. PRIMARY SCHOOL
- 3. FORM 1-3
- 4. FORM 4-5
- 5. FORM 6
- 6. COLLEGE/UNIVERSITY
- 7. POST COLLEGE/UNIVERSITY

14. Is the house you live in owned or rented by you or your family member?

- 1. SELF OR SPOUSE OWNS
- 2. OTHER FAMILY MEMBER OWNS
- 3. SELF OR SPOUSE RENTS
- 4. OTHER FAMILY MEMBER RENTS
- 5. OTHERS (SPECIFY) _____

15. How many living children do you have? _____ CHILDREN

16. I would like to get some information on your child living closest to you.

(Interviewer, please get complete information of child living closest to parent)

No.	Name	Year born	Gender (F/M)	Address
1.				
2.				
3.				

17. How many people normally live in this house with you (including yourself)? Number of people _____

18. Who and how many people lives here with you?

No	Items	Who (/)	No.
1.	No one		
2.	Spouse		
3.	Daughters		
4.	Sons		
5.	Daughter-in-law		
6.	Son-in-law		
7.	Grandchild(ren)		
8.	Mother		
9.	Father		
10.	Brothers		
11.	Sisters		
12.	Parent-in-law		
13.	Others (specify)		

Parents have many different ideas about what their child(ren) should do or should not do for them. In your opinion do you disagree, not sure, or agree with the following statements about parent-child(ren) relationship.

	Disagree	Not sure	Agree
	1	2	3
19. Married children live close to parents.....	1	2	3
20. Adult children take care of their parents in whatever way necessary when they are sick.....	1	2	3
21. Adult children should give their parents financial help.....	1	2	3
22. If children lives nearby after they grow up, they visit their parents at least once a week.....	1	2	3
23. Children who lives at a distance write to their parents at least once a week....	1	2	3
24. Adult children feels responsible for their older parents.....	1	2	3
25. Older parents and adult children are together on festive occasions, such as 'hari raya'.....	1	2	3
26. Older parents can discuss matters of personal importance with their adult children.....	1	2	3
27. Adult children gives older parents emotional support.....	1	2	3
28. Adult children willing to sacrifice some of their personal freedom to take care of aging parents if they need it.....	1	2	3
29. Adult children make room for their older parents in their home in an emergency.....	1	2	3
30. Adult children give older parents advice when they need it.....	1	2	3

Disagree	Not sure	Agree
1	2	3

31. Adult children adjust their work schedule in order to help older parents when they need it.....1 2 3
32. When older parents are unable to care for themselves, they can live with one of their adult children1 2 3
33. Adult children adjust their family schedule in order to help older parents when they need it.....1 2 3

I would like to ask your opinion regarding parents' responsibilities toward adult children and adult children's responsibilities toward their parents.

34. In your opinion, what are the responsibilities of parents toward adult children

Mother's responsibilities _____

Father's responsibilities _____

35. What are the responsibilities of adult children toward their mothers and fathers?

Children	Mother	Father
Unmarried son		
Married son		
Unmarried daughter		
Married daughter		

Please indicate how well each of these statements describes your relationship with your children. In your opinion do you disagree, not sure, or agree with the statements.

	Disagree 1	Not sure 2	Agree 3
36. I can depend on my child(ren) to help me if I really need it.....	1	2	3
37. I feel personally responsible for the personal well-being of my child(ren).....	1	2	3
38. If something went wrong, my child(ren) would come to my assistance.....	1	2	3
39. I have a close relationship with my child(ren) that provides me with a sense of emotional security and well-being.	1	2	3
40. I could talk to my child(ren) about important decisions in my life.....	1	2	3
41. My child(ren) do not rely on me for their well-being.....	1	2	3
42. I could turn to my child(ren) for advice if I were having problems.....	1	2	3

Disagree
1

Not sure
2

Agree
3

43. I feel a strong emotional bond
with my child(ren).....1 2 3
44. My child(ren) can be depended on
for aid if I really needed it.....1 2 3
45. I do not feel comfortable talking about
problems with my child(ren).....1 2 3

I would like to ask about feelings between you and your
child(ren). Please circle the response that describes your
feelings

- 0 - NOT AT ALL
1 - A LITTLE
2 - SOMEWHAT
3 - QUITE A BIT
4 - A GREAT DEAL

46. How much does your child trust you?..0 1 2 3 4
47. How much does your child care
about you?.....0 1 2 3 4
48. How much do you trust your child?....0 1 2 3 4
49. How much do you care about your
child?.....0 1 2 3 4
50. How would you rate your overall relationship with your
child(ren)?

1. VERY POOR
2. POOR
3. FAIR
4. GOOD
5. VERY GOOD

Please indicate your response to the statements below.

1 - YES

0 - NO

- | | |
|--|---|
| 51. Children should obey their parents wishes except those that are against the religion.....1 | 0 |
| 52. Child(ren) should be ready to help parents at any time.....1 | 0 |
| 53. Children should not cause harm to their parents....1 | 0 |
| 54. Parents should not cause harm to child(ren).....1 | 0 |
| 55. Child(ren) should pray for their parents health and well-being even after they are dead.....1 | 0 |
| 56. Obedience to one's father take precedence over the obedience to mother.....1 | 0 |
| 57. Child(ren) should not belittled their parents.....1 | 0 |
| 58. Child(ren) should not say bad things about their parents.....1 | 0 |
| 59. It is sinful to mistreat your parents.....1 | 0 |
| 60. Child(ren) should show respect and curtesy when interacting with parents.....1 | 0 |
| 61. Child(ren) should talk back or raise their voice to their parents.....1 | 0 |
| 62. Child(ren) should assist their parents financially, if needed.....1 | 0 |
| 63. For someone your age, do you consider your health to be excellent, good, fair or poor? (Circle number) | |

1. POOR
2. FAIR
3. GOOD
4. EXCELLENT

64. How much does your health prevent you from doing what you need or want to do? (Circle number)

- 1. NOT AT ALL
- 2. A LITTLE
- 3. A GREAT DEAL

65. Has your overall health caused you a great deal of worry, some worry, no worry at all or don't know?

- 1. DON'T KNOW
- 2. NO WORRY
- 3. SOME WORRY
- 4. A GREAT DEAL OF WORRY

I would like about your participation activities in your community

66. Do you belong to any associations in your community?

- 0 - NO (Go to question no. 70)
- 1 - YES

67. If yes, name of association _____

68. Do you hold any post in the association

- 0 - NO
- 1 - YES

69. Position in the association

- 1. President
- 2. Vice President
- 3. Secretary
- 4. Assistance Secreatry
- 5. Treasurer
- 6. Ordinary member

70. What types and frequencies of activities did you participate in last year?

Activities	Frequency

71. How far is the mosque or "surau" from your house?
_____ km/miles

Please indicate the frequencies and the reasons these things happen between you and your closest child last year.

72. How often do you visit your child in his/her house?

72b. Why? _____

73. How often does your child visit you? _____

73b. Why? _____

74. How often does your child brings gifts to you?

74b. What are they? _____

75. How often do you write letters to your child?

75b. Why? _____

76. How often do you receive letters from your child?

77. How often does your child does light work in your home such as cleaning or putting things away?

78. How often do you do light work such as cleaning or putting things away in your child's home?

79. How often does your child do heavy work such as arranging furniture and yardwork in your home?

80. How often do you do heavy work such as arranging furniture and yard work in your child's home?

81. How often do you advise your child? _____
81b. What are they? _____
82. How often do you receive advise from your child?

- 82b. What are they? _____
83. How often do you help your child in an emergency such as an accident, sickness or death?

84. How often does your child help you in an emergency such as an accident, sickness, or death?

85. How often do you give or lend money to your child?

86. How often does your child give or lend money to you?

87. How often does your child bring you to grocery, shopping or visit the doctor?

88. How often do you take care of your grandchild(ren)?

89. Do you ever telephone your child?
1 - YES 0 - NEVER
- 89b. If yes, how often do you telephone your parent?

- 89c. Do you use your own telephone?
1 - YES 0 - NO
- 89d. If no, where do you call your parent?

Finally, I would like to ask the source of your household's income for 1991.

90. Please indicate the frequency and amount you receive from each source. (Check all that apply)

No.	Items	(/)	Frequency	Amount
1.	Self's primary income			
2.	Spouse's primary income			
3.	Contribution from coresident child(ren)			
4.	Contribution from nonresident child(ren)			
5.	Contribution from other relatives			
6.	Nonmonetary contribution from child(ren)			
7.	Bonus/allowance			
8.	Investment/shares			
9.	Pension			
10.	Welfare			
11.	Rents			
12.	Sales of agriculture products			
13.	Others			

CONFIDENTIAL

SERIAL NO. _____

TITLE OF STUDY: CORRELATES OF FILIAL RESPONSIBILITY

CHILDREN INSTRUMENT

IDENTIFYING INFORMATION

Name: _____

Address: _____

Village: _____

Subdistrict: _____

Gender: 0-- Female 1-- Male

Age: _____

Interviewer name: _____

Date: _____

Time start : _____ Time end : _____

(The above information will permit the identification of respondents. It will be used only by persons engaged in the study and will not be disclosed to others for any other purposes).

(Interviewer, observe and circle housing information)

TYPE OF HOUSING:

1. SINGLE STOREY BUNGALOW
2. DOUBLE STOREY BUNGALOW
3. SINGLE STOREY SEMI-DETACHED
4. DOUBLE STOREY SEMI-DETACHED
5. SINGLE STOREY TERRACE
6. DOUBLE STOREY TERRACE
7. FLAT

HOUSING MATERIAL:

1. BRICK
2. WOODEN
3. MIXED BRICK/WOODEN

Parents have many different ideas about what their child(ren) should do or should not do for them. In your opinion do you disagree, not sure or agree with the following statements about parent-child(ren) relationships.

	Disagree 1	Not Sure 2	Agree 3
1. Married children live close to parents.....	1	2	3
2. Adult children take care of their parents in whatever way necessary when they are sick.....	1	2	3
3. Adult children give their parents financial help.....	1	2	3
4. If children live nearby after they grow up, they visit their parents at least once a week.....	1	2	3
5. Children who live at a distance, more than twenty miles away, write to their parents at least once a week.....	1	2	3
6. Adult children feel responsible for their older parents.....	1	2	3
7. Older parents and adult children together on festive occasions, such as 'hari raya'.....	1	2	3
8. Older parents can discuss matters of personal importance with their adult children.....	1	2	3
9. Adult children give older parents emotional support.....	1	2	3
10. Adult children willing to sacrifice some of their personal freedom to take care of aging parents if they need it.....	1	2	3
11. Adult children make room for their older parents in their home in an emergency.....	1	2	3

Disagree	Not Sure	Agree
1	2	3

- | | | | |
|---|---|---|---|
| 12. Adult children give older parents advice when they need it..... | 1 | 2 | 3 |
| 13. Adult children adjust their work schedule in order to help older parents when they need it..... | 1 | 2 | 3 |
| 14. When older parents are unable to care for themselves, they can live with one of their adult children..... | 1 | 2 | 3 |
| 15. Adult children adjust their family schedule in order to help older parents when they need it..... | 1 | 2 | 3 |

Please indicate how well each of these statements describes your relationship with your parents. Circle the number which best reveals how you disagree, not sure, and agree with the statements.

Disagree	Not Sure	Agree
1	2	3

- | | | | |
|--|---|---|---|
| 16. I can depend on my parent to help me if I really need it..... | 1 | 2 | 3 |
| 17. My parent depends on me for help..... | 1 | 2 | 3 |
| 18. I feel personally responsible for the personal well-being of my parent..... | 1 | 2 | 3 |
| 19. If something went wrong, my parent would come to my assistance..... | 1 | 2 | 3 |
| 20. I have a close relationship with my parent that provides me with a sense of emotional security and well-being..... | 1 | 2 | 3 |
| 21. I could talk to my parent about important decisions in my life..... | 1 | 2 | 3 |

- | | Disagree
1 | Not Sure
2 | Agree
3 |
|---|---------------|---------------|------------|
| 22. My parents do not rely on me for his/her well-being..... | 1 | 2 | 3 |
| 23. I could turn to my parent for advice if I were having problems..... | 1 | 2 | 3 |
| 24. I feel a strong emotional bond with my parent..... | 1 | 2 | 3 |
| 25. My parents cannot be depended on for aid if I really needed it..... | 1 | 2 | 3 |
| 26. I do not feel comfortable talking about problems with my parent..... | 1 | 2 | 3 |
| 27. I can count on my parent in an emergency..... | 1 | 2 | 3 |
| 28. For someone your age, do you consider your health to be excellent, good, fair, or poor? (Circle number) | | | |
| 1. POOR | | | |
| 2. FAIR | | | |
| 3. GOOD | | | |
| 4. EXCELLENT | | | |
| 29. How much does your health prevent you from doing what you need or want to do? | | | |
| 1. NOT AT ALL | | | |
| 2. A LITTLE | | | |
| 3. A GREAT DEAL | | | |
| 30. Has your overall health caused you a great deal of worry, some worry, no worry at all or don't know? | | | |
| 1. DON'T KNOW | | | |
| 2. NO WORRY | | | |
| 3. SOME WORRY | | | |
| 4. A GREAT DEAL OF WORRY | | | |

31. How do you rate your parent's health?

1. POOR
2. FAIR
3. GOOD
4. EXCELLENT

32. Is the house you live in owned or rented by you or your family member?

1. SELF OR SPOUSE OWNS
2. OTHER FAMILY MEMBER OWNS
3. SELF OR SPOUSE RENTS
4. OTHER FAMILY MEMBER RENTS
5. OTHERS (SPECIFY) _____

33. How many people normally live in this house with you?

Number of people _____

34. Who and how many people lives here with you?

No.	Items	Who (/)	No.
1.	No one		
2.	Spouse		
3.	Daughter		
4.	Son		
5.	Daughter-in-law		
6.	Son-in-law		
7.	Grandchildren		
8.	Mother		
9.	Father		
10.	Brothers		
11.	Sisters		
12.	Parent-in-law		
13.	Others (specify)		

Please indicate YES (1) or NO (0) to the statements below.

- | | | |
|---|---|---|
| 35. Children should obey their parents wishes except those that are against the religion..... | 1 | 0 |
| 36. Children should not cause harm to their parents.. | 1 | 0 |
| 37. Child(ren) should be ready to help parents at any time..... | 1 | 0 |
| 38. Parents should not cause harm to child(ren)..... | 1 | 0 |
| 39. Child(ren) should pray for their parents' health and well-being even after they are dead..... | 1 | 0 |
| 40. Obedience to one's father take precedence over the obedience to one's mother..... | 1 | 0 |
| 41. Child(ren) should not belittled their parents.... | 1 | 0 |
| 42. Child(ren) should not say bad things about their parents..... | 1 | 0 |
| 43. It is sinful to mistreat your parents..... | 1 | 0 |
| 44. Child(ren) should show respect and curtesy when interacting with them..... | 1 | 0 |
| 45. Child(ren) should talk back or raise the voice to their parents..... | 1 | 0 |
| 46. Child(ren) should assist their parents financially, if needed | 1 | 0 |

Please indicate the frequencies and the reasons these things happen between you and your parents last year.

47. How often do you visit your parents in their home?

47b. Why? _____

48. How often does your parent visit you in your home?

48b. Why? _____

49. How often do you write letters to your parent?

49b. Why? _____

50. How often do you receive letters from your parent?

51. How often do you do light work home such as cleaning or putting things away in your parent's home?

52. How often does your parent do light work in your home such as cleaning or putting things away?

53. How often do you do heavy work such as arranging the furniture and yardwork in your parent's home?

54. How often do you bring your parent to the grocery store, shopping, or visit the doctor?

55. How often do you bring gifts to your parent?

56. How often do you advise your parent?

56b. What are they? _____

57. How often do you receive advise from your parent?

57b. What are they? _____

58. How often do you help your parent in an emergency such as an accident, sickness or death?

59. How often do you give or lend money to your parent?

60. How often does your parent give or lend you money?

61. How often does your parent help in an emergency such as accidents, sickness or death?

62. How often does your parent take care of your child(ren)?

63. Do you ever telephone your parent?

1 - YES 0 - Never

63b. If you do, how often do you telephone your parent?

63c. Do you use your own telephone?

1 - Yes 0 - No

63d. If you don't, where do you use the telephone to call your parent? _____

I would like to ask your opinion regarding parents' responsibilities toward adult children and adult children's responsibilities toward their parents.

64. In your opinion, what are the responsibilities of parents toward adult children?

Mothers' responsibilities _____

Fathers' responsibilities _____

65. What are the responsibilities of adult children toward parents?

Children	Mother	Father
Unmarried son		
Married son		
Unmarried daughters		
Married daughters		

Now I would like to ask about feelings between you and your parents. Please circle the response that describes your feelings

- 0 - NOT AT ALL
- 1 - A LITTLE
- 2 - SOMEWHAT
- 3 - QUITE A BIT
- 4 - A GREAT DEAL

67. How much does your parents trust you?...0 1 2 3 4

68. How much does your parents care about you?... 0 1 2 3 4

69. How much do you trust your parents?.....0 1 2 3 4

70. How much do you care about your parents?.....0 1 2 3 4

71. How would you rate your overall relationship with your parents?

- 1. VERY POOR
- 2. POOR
- 3. FAIR
- 4. GOOD
- 5. VERY GOOD

I would like to ask about your participation in the community

72. Do you belong to any associations around your home?

- 0 - No
- 1 - Yes (if yes, name the association)

73. If yes, name of association _____

74. Do you hold any position in the association?

- 0 - No
- 1 - Yes

75. Position in the organization
(Circle number)

1. President
2. Vice President
3. Secretary
4. Assistance secretary
5. Treasurer
6. Ordinary member

76. How far is the mosque or 'surau' from your house?
_____ km/miles

77. What types and frequencies of activities do you
participate in last year?

Activities	Frequency

Finally, I would like to ask some background information to
help in the interpretation of the results.

78. What is your present marital status?

1. MARRIED
2. WIDOWED
3. DIVORCED
4. SEPARATED
5. NEVER MARRIED

[illegible]

BROTHERS SISTERS

81. How far is your home from your parent? km.

1 ONLY CHILD 6 FIFTH CHILD
2 FIRST CHILD 7 SIXTH CHILD
3 SECOND CHILD 8 SEVENTH CHILD
4 THIRD CHILD 9 YOUNGEST
5 FOURTH CHILD 10 OTHERS (SPECIFY)

83. How many years of school did you complete?

[illegible]

84. Are you presently (or previously) employed?

1. YES, FULL TIME (40 hours/week)
2. YES, PART TIME (40 hours/week)
3. YES, PREVIOUSLY AND RETIRED
4. NOT EMPLOYED AND NOT RETIRED
5. NEVER WORKED
6. OTHERS (SPECIFY)

85. What is your present (or last previous) type of employment? _____
86. Is your spouse presently (or previously) employed?
1. YES, FULL TIME (40 hours/week)
 2. YES, PART TIME (40 hours/week)
 3. YES, PREVIOUSLY AND RETIRED
 4. NOT EMPLOYED AND NOT RETIRED
 5. NEVER WORKED
 6. OTHERS (SPECIFY) _____
87. What is your spouse's present (or last previous) type of employment? _____
88. What are the sources of your household's income in 1991. Please indicate the frequency and amount from each source?

No.	SOURCE OF INCOME	(/)	FREQUENCY	TOTAL (MR)
1.	Self's primary income			
2.	Spouse's primary income			
3.	Contribution from coresident child(ren)			
4.	Contribution from nonresident child(ren)			
5.	Nonmonetary contribution from child(ren)			
6.	Contribution from other relatives			
7.	Bonus/Allowance			
8.	Investment/shares			
9.	Pension			
10.	Welfare			
11.	Rents			
12.	Sales of agriculture product			
13.	Others			

SULIT

NO SIRI: _____

KAJIAN HUBUNGKAIT TANGGUNGJAWAB FILIAL

INSTRUMEN IBU BAPA

MAKLUMAT PENGENALAN

NAMA : _____

ALAMAT : _____

KAMPUNG : _____

MUKIM : _____

JANTINA : 0 - PEREMPUAN 1 - LELAKI

UMUR : _____

NAMA PENEMUBUAL: _____

TARIKH: _____

MASA MULA : _____ MASA TAMAT: _____

(Maklumat di atas digunakan untuk mengenalpasti responden. Maklumat ini hanya digunakan oleh penyelidik dan individu yang berkaitan dengan penyelidikan ini sahaja. Maklumat ini tidak akan disebarikan kepada mana-mana pihak yang tidak berkaitan dengan kajian ini).

(Penemubual, sila tandakan)

JENIS RUMAH:

1. SEBUAH 1 TINGKAT
2. SEBUAH 2 TINGKAT
3. BERKEMBAR 1 TINGKAT
4. BERKEMBAR 2 TINGKAT
5. TERES 1 TINGKAT
6. TERES 2 TINGKAT
7. FLAT

BAHAN BINAAN RUMAH

1. BATU
2. KAYU
3. CAMPURAN BATU/KAYU

Terlebih dahulu saya ingin mendapatkan sedikit maklumat latarbelakang untuk menolong menginterpretasikan hasil kajian ini.

1. Apakah taraf perkahwinan anda?
 1. BERKAHWIN
 2. BERCERAI
 3. BERPISAH
 4. BALU/DUDA
 5. TAK PERNAH KAHWIN
2. Jika berkahwin, adakah pasangan anda sekarang ini bekerja?
 0. TIDAK BEKERJA (pergi soalan no.3)
 1. BEKERJA (pergi soalan no.4)
3. Pernahkah pasangan anda bekerja?
 0. TIDAK PERNAH
 1. PERNAH (pergi soalan no 4)
4. Apakah jenis pekerjaan pasangan anda sekarang (atau sebelum ini)? _____
5. Adakah anda sekarang ini bekerja?
 0. TIDAK BEKERJA (pergi soalan 6)
 1. BEKERJA (pergi soalan 7)
6. Pernahkah anda bekerja?
 0. PERNAH (pergi soalan 7)
 1. TIDAK PERNAH
7. Apakah jenis pekerjaan anda sekarang (atau sebelum ini)? _____
8. Bolehkah anda membaca surat khabar?
 - 0 - TIDAK
 - 1 - YA
9. Jika tidak, kenapa? _____
10. Bolehkah anda menulis surat?
 - 0 - TIDAK
 - 1 - YA

11. Jika tidak,
kenapa? _____
12. Pernahkah anda bersekolah?
- 0 - TIDAK PERNAH
1 - PERNAH
13. Apakah tahap tertinggi persekolahan anda?
1. Sekolah agama
2. Sekolah rendah
3. Tingkatan 1-3
4. Tingkatan 4-5
5. Tingkatan 6
6. Kolej/Universiti
7. Lepas ijazah
14. Adakah rumah yang anda tinggal ini milik anda atau di
sewa oleh anda atau ahli keluarga anda?
1. KEPUNYAAN SENDIRI ATAU PASANGAN
2. KEPUNYAAN AHLI KELUARGA LAIN
3. SEWA SENDIRI ATAU SEWA OLEH SUAMI/ISTERI
4. AHLI KELUARGA LAIN SEWA
5. LAIN-LAIN (NYATAKAN) _____
15. Berapakah bilangan anak anda yang masih
hidup? _____ (Bil)
16. Saya ingin mendapatkan sedikit maklumat mengenai anak-anak
anda. (Penemubual sila dapatkan maklumat lengkap tempat
tinggal anak yang tinggal terdekat dengan ibu/bapa)

Bil.	Nama	Tahun/Umur Lahir	Jantina (L/P)	Tempat tinggal
1.				
2.				
3.				

17. Berapa ramaikah orang yang biasa tinggal serumah dengan anda? (Termasuk anda) Bilangan _____ orang.
18. Siapakah dan berapa ramaikah orang yang biasa tinggal bersama dirumah anda?
(Tandakan individu dan bilangan yang berkenaan)

BIL.	PERKARA	SIAPA (/)	BILANGAN
1.	Tiada siapa		
2.	Suami/isteri		
3.	Anak-anak perempuan		
4.	Anak-anak lelaki		
5.	Menantu perempuan		
6.	Menantu lelaki		
7.	Cucu		
8.	Ibu		
9.	Bapa		
10.	Adik beradik lelaki		
11.	Adik beradik perempuan		
12.	Mertua		
13.	Lain-lain (nyatakan)		

Ibubapa mempunyai pelbagai pandangan/pendapat tentang bagaimana anak-anak harus melakukan sesuatu untuk mereka. Pada pendapat anda adakah anda TIDAK BERSETUJU, TIDAK PASTI, BERSETUJU dengan kenyataan-kenyataan di bawah mengenai hubungan ibubapa dengan anak dewasa.

	Tidak Bersetuju 1	Tidak Pasti 2	Bersetuju 3
19. Anak-anak yang sudah berkahwin tinggal berdekatan dengan ibubapa.....1	2	3	
20. Anak dewasa menjaga ibubapa dengan apa cara sekali pun apabila ibubapa sakit.....1	2	3	
21. Anak dewasa memberi bantuan kewangan kepada ibubapa.....1	2	3	
22. Jika anak-anak tinggal berdekatan selepas mereka dewasa, mereka melawat ibubapa sekurang-kurangnya sekali seminggu.....1	2	3	
23. Anak-anak yang tinggal berjauhan menulis surat kepada ibubapa sekurang-kurangnya seminggu sekali.....1	2	3	
24. Anak dewasa berasa bertanggungjawab terhadap ibubapa.....1	2	3	
25. Ibubapa dan anak-anak dewasa bersama pada hari-hari perayaan seperti 'hari raya'.....1	2	3	
26. Ibubapa boleh berbincang dengan anak dewasa mengenai hal-hal peribadi yang penting.....1	2	3	
27. Anak dewasa memberi sokongan emosi kepada ibubapa.....1	2	3	
28. Anak dewasa rela berkorban kebebasan peribadi untuk menjaga ibubapa mereka.....1	2	3	
29. Anak dewasa menerima ibubapa tinggal bersama pada masa kecemasan.....1	2	3	

	Tidak Bersetuju 1	Tidak Pasti 2	Bersetuju 3
30. Anak dewasa memberi nasihat kepada ibubapa.....1	2	3	
31. Anak dewasa menyesuaikan masa kerja untuk menolong ibubapa mereka.....1	2	3	
32. Apabila ibubapa tidak boleh menjaga diri sendiri, mereka boleh tinggal bersama dengan salah seorang dari anak dewasa mereka.....1	2	3	
33. Anak dewasa menyesuaikan aktiviti keluarga untuk menolong ibubapa mereka.....1	2	3	

Saya ingin tanya anda mengenai tanggungjawab ibu dan bapa terhadap anak-anak dewasa dan tanggungjawab anak dewasa terhadap ibu dan bapa.

34. Pada pendapat anda apakah tanggungjawab ibu dan bapa terhadap anak dewasa?

Tanggungjawab ibu _____

Tanggungjawab bapa _____

35. Apakah tanggungjawab anak dewasa terhadap ibu dan bapa?

ANAK	IBU	BAPA
Lelaki bujang		
Lelaki berkahwin		
Perempuan bujang		
Perempuan berkahwin		

Sila nyatakan samada kenyataan-kenyataan di bawah tepat menunjukkan hubungan anda dengan anak dewasa anda.

	Tidak Bersetuju 1	Tidak Pasti 2	Bersetuju 3
36. Saya boleh bergantung kepada anak untuk menolong jika saya benar-benar memerlukan pertolongan.....1	2	3	
37. Saya sendiri berasa bertanggungjawab terhadap kesejahteraan anak saya.....1	2	3	
38. Jika sesuatu yang tidak dikehendaki berlaku, anak akan membantu saya.....1	2	3	
39. Hubungan saya yang rapat dengan anak membawa kestabilan emosi dan kesejahteraan hidup.....1	2	3	
40. Saya boleh berbincang tentang keputusan yang penting dalam hidup dengan anak saya.....1	2	3	
41. Anak saya tidak bergantung kepada saya untuk kesejahteraan hidup.....1	2	3	
42. Saya boleh meminta nasihat dari anak jika saya mempunyai masalah.....1	2	3	
43. Saya merasa ikatan emosi yang kukuh dengan anak saya.....1	2	3	
44. Saya boleh bergantung kepada bantuan anak bila saya benar-benar memerlukan.....1	2	3	
45. Saya tidak berasa selesa berbicara mengenai masalah dengan anak saya.....1	2	3	

Saya ingin tahu mengenai perasaan anda terhadap anak dewasa anda. (Bulatkan jawapan)

- 0 - TIDAK SEDIKIT PUN
- 1 - SEDIKIT
- 2 - BOLEH TAHAN
- 3 - BANYAK
- 4 - TERLALU BANYAK

46. Berapa banyakkah anak anda percayai dengan anda?.....0	1	2	3	4
47. Berapa banyakkah anak anda mengambiltahu tentang anda?.....0	1	2	3	4

48. Berapa banyakkah anda percayai dengan anak anda?.....0 1 2 3 4
49. Berapa banyakkah anda mengambiltahu tentang anak anda?.....0 1 2 3 4
50. Bagaimanakah anda menilai hubungan keseluruhan anda dengan anak anda? (Bulatkan jawapan)
1. SANGAT TIDAK BAIK
 2. TIDAK BAIK
 3. SEDERHANA BAIK
 4. BAIK
 5. SANGAT BAIK

Sila nyatakan (1) YA atau (0) TIDAK terhadap kenyataan-kenyataan di bawah.

0 - TIDAK 1 - YA

51. Anak-anak patut mendengar kehendak ibubapa kecuali yang bertentangan dengan agama.....1 0
52. Anak-anak tidak patut membahayakan ibubapa.....1 0
53. Anak-anak patut bersedia menolong ibubapa bila-bila masa.....1 0
54. Ibubapa tidak patut membahayakan anak-anak mereka...1 0
55. Anak-anak patut berdoa untuk kesihatan dan kesejahteraan ibubapa biarpun mereka telah meninggal dunia.....1 0
56. Ketaatan kepada bapa lebih utama dari ketaatan kepada ibu.....1 0
57. Anak-anak tidak patut mempekercilkan ibubapa.....1 0
58. Anak-anak tidak patut menceritakan keburukan ibubapa.....1 0
59. Adalah berdosa jika anak-anak salahlaku terhadap ibubapa.....1 0
60. Anak-anak patut menghormati dan bersopan santun bila berinteraksi dengan ibubapa.....1 0
61. Anak-anak patut melawan atau meninggikan suara terhadap ibubapa.....1 0
62. Anak-anak patut membantu dari segi kewangan, jika ibubapa memerlukan.....1 0

63. Berbanding dengan rakan sebaya, bagaimanakah taraf kesihatan anda_____?
1. KURANG BAIK
 2. SEDERHANA BAIK
 3. BAIK
 4. SANGAT BAIK
64. Adakah kesihatan anda mempengaruhi anda menjalankan kerja- kerja yang diperlukan atau kerja-kerja yang hendak dijalankan?
1. TIDAK SEKALIPUN MENGHALANG
 2. SEDIKIT MENGHALANG
 3. SANGAT MENGHALANG
65. Adakah keadaan kesihatan anda secara amnya membuat anda berasa bimbang?
1. TIDAK TAHU
 2. TIDAK BIMBANG
 3. SEDIKIT BIMBANG
 4. SANGAT BIMBANG

Saya ingin tahu tentang penglibatan anda dalam komuniti tempat anda tinggal.

66. Adakah anda menjadi ahli apa-apa persatuan di tempat anda tinggal ?
- 0 - TIDAK (Jika TIDAK, terus soalan 70)
1 - YA (Jika YA, terus soalan turutan)
67. Nama persatuan_____
68. Adakah anda memegang jawatan dalam persatuan tersebut?
- 0 - TIDAK
1 - YA
69. Nama jawatan dalam persatuan (Bulatkan yang berkenaan)
1. Presiden
 2. Timbalan Presiden
 3. Setiausaha
 4. Timbalan Setiausaha
 5. Bendahari
 6. Ahli Biasa
70. Apakah jenis dan kekerapan aktiviti-aktiviti yang anda lakukan pada tahun lepas?

Aktiviti	Kekerapan

71. Berapa jauhkah jarak masjid atau surau dari rumah anda?
_____ km/batu

Sila nyatakan kekerapan perkara-perkara ini berlaku diantara anda dengan anak yang tinggal terdekat pada tahun lepas.

72. Berapa kerapkah anda melawat anak dewasa dirumah mereka?

72b. Apakah tujuan? _____

73. Berapa kerapkah anak dewasa melawat anda? _____

73b. Apakah tujuan? _____

74. Berapa kerapkah anak anda membawa buah tangan semasa melawat anda? _____

74b. Apakah dia? _____

75. Berapa kerapkah anda menulis surat kepada anak dewasa anda? _____

75b. Apakah tujuan? _____

76. Berapa kerapkah anda menerima surat dari anak dewasa anda? _____

77. Berapa kerapkah anak anda membuat kerja-kerja ringan dirumah anda seperti membersih atau mengemas rumah? _____

78. Berapa kerapkah anda membuat kerja-kerja ringan dirumah anak dewasa anda seperti membersih atau mengemas rumah? _____

79. Berapa kerapkah anak dewasa anda membuat kerja-kerja berat dirumah anda seperti menyusun perabut dan kerja di luar rumah? _____

80. Berapa kerapkah anda membuat kerja-kerja berat dirumah anak dewasa anda seperti menyusun perabut dan kerja di luar rumah? _____

81. Berapa kerapkah anda memberi nasihat kepada anak anda? _____
- 81b. Apakah nasihatnya? _____
82. Berapa kerapkah anda menerima nasihat dari anak anda? _____
- 82b. Apakah nasihatnya? _____
83. Berapa kerapkah anda menolong anak pada masa kecemasan? (seperti kemalangan, kesakitan atau kematian) _____
84. Berapa kerapkah anak anda menolong masa kecemasan? (seperti kemalangan, kesakitan atau kematian) _____
85. Berapa kerapkah anda memberi atau meminjamkan wang kepada anak dewasa? _____
86. Berapa kerapkah anak anda memberi atau meminjamkan wang kepada anda? _____
87. Berapa kerapkah anak anda membawa anda ke kedai runcit, membeli-belah atau berjumpa doktor? _____
88. Berapa kerapkah anda menjaga cucu? _____
89. Pernahkah anda menelefon anak dewasa anda?
- 1 - PERNAH 0 - TAK PERNAH
- 89b. Kalau pernah, berapa kerapkah anda menelefon anak dewasa anda? _____
- 89c. Adakah anda mengguna telefon sendiri?
- 0 - TIDAK 1 - YA
- 89d. Kalau tidak dimanakah anda mengguna telefon untuk bercakap dengan anak dewasa anda? _____

90. Akhir sekali saya ingin tanya apakah sumber pendapatan isirumah anda pada tahun 1991.
Sila nyatakan kekerapan anda menerima dan berapa banyakkah pendapatan dari sumber itu? (Tandakan semua yang berkenaan)

BIL	PERKARA	(/)	KEKERAPAN	JUMLAH
1.	Kerja utama anda			
2.	Kerja utama pasangan			
3.	Sumbangan kewangan anak yang tinggal serumah			
4.	Sumbangan kewangan anak yang tidak tinggal serumah			
5.	Sumbangan ahli keluarga lain			
6.	Sumbangan barangan oleh anak-anak			
7.	Bonus/Elaun			
8.	Saham			
9.	Pencen			
10.	Bantuan kebajikan			
11.	Sewa (tanah, rumah)			
12.	Jualan hasil pertanian			
13.	Lain-lain			

Sekian, terima kasih.

SULIT

NO SIRI: _____

KAJIAN HUBUNGKAIT TANGGUNGJAWAB FILIAL

INSTRUMEN ANAK DEWASA

MAKLUMAT PENGENALAN

NAMA : _____

ALAMAT : _____

KAMPUNG : _____

MUKIM : _____

JANTINA : 0 - PEREMPUAN 1 - LELAKI

UMUR : _____

NAMA PENEMUBUAL: _____

TARIKH: _____

MASA MULA : _____ MASA TAMAT: _____

(Maklumat di atas digunakan untuk mengenalpasti responden. Maklumat ini hanya digunakan oleh penyelidik dan individu yang berkaitan dengan penyelidikan ini sahaja. Maklumat ini tidak akan disebarikan kepada mana-mana pihak yang tidak berkaitan dengan kajian ini).

(Penemubual sila tandakan)

JENIS RUMAH :

1. SEBUAH 1 TINGKAT
2. SEBUAH 2 TINGKAT
3. BERKEMBAR 1 TINGKAT
4. BERKEMBAR 2 TINGKAT
5. TERES 1 TINGKAT
6. TERES 2 TINGKAT
7. FLAT

BAHAN BINAAN RUMAH :

1. BATU
2. KAYU
3. CAMPURAN BATU/KAYU

Ibubapa mempunyai pelbagai pandangan/pendapat tentang bagaimana anak-anak harus melakukan sesuatu untuk mereka. Pada pendapat anda adakah anda TIDAK BERSETUJU, TAK PASTI, BERSETUJU dengan kenyataan-kenyataan di bawah mengenai hubungan ibubapa dengan anak-anak.

	Tidak Bersetuju 1	Tidak Pasti 2	Bersetuju 3
1. Anak-anak yang sudah berkahwin tinggal berdekatan dengan ibubapa.....1	2	3	
2. Anak dewasa menjaga ibubapa dengan apa cara sekali pun apabila ibubapa sakit.....1	2	3	
3. Anak dewasa memberi bantuan kewangan kepada ibubapa.....1	2	3	
4. Jika anak-anak tinggal berdekatan selepas mereka dewasa, mereka melawat ibubapa sekurang-kurangnya sekali seminggu.....1	2	3	
5. Anak-anak yang tinggal berjauhan menulis surat kepada ibubapa sekurang-kurangnya seminggu sekali.....1	2	3	
6. Anak dewasa berasa bertanggungjawab terhadap ibubapa.....1	2	3	
7. Ibubapa dan anak-anak dewasa bersama pada hari-hari perayaan seperti 'hari raya'....1	2	3	
8. Ibubapa boleh berbincang dengan anak dewasa mengenai hal-hal peribadi yang penting.....1	2	3	
9. Anak dewasa memberi sokongan emosi kepada ibubapa.....1	2	3	
10. Anak dewasa rela berkorban kebebasan peribadi untuk menjaga ibubapa mereka jika perlu.....1	2	3	
11. Anak dewasa boleh menerima ibubapa tinggal bersama pada masa kecemasan.....1	2	3	

	Tidak Bersetuju 1	Tidak Pasti 2	Bersetuju 3
12. Anak dewasa memberi nasihat kepada ibubapa mereka jika perlu.....1	2	3	
13. Anak dewasa menyesuaikan masa kerja untuk menolong ibubapa mereka .....1	2	3	
14. Apabila ibubapa tidak boleh menjaga diri sendiri, mereka tinggal bersama dengan salah seorang dari anak dewasa mereka.....1	2	3	
15. Anak dewasa menyesuaikan aktiviti keluarga untuk menolong ibubapa mereka..... 1	2	3	

**Sila nyatakan samada kenyataan-kenyataan di bawah tepat
menunjukkan hubungan anda dengan ibubapa anda.
(Bulatkan yang berkenaan)**

	Tidak Bersetuju 1	Tidak Pasti 2	Bersetuju 3
16. Saya boleh bergantung kepada ibu/bapa untuk mendapatkan pertolongan jika saya benar-benar memerlukan.....1	2	3	
17. Ibu/bapa bergantung kepada saya untuk mendapatkan pertolongan.....1	2	3	
18. Saya sendiri berasa bertanggungjawab terhadap kesejahteraan ibu/bapa saya.....1	2	3	
19. Jika sesuatu yang tidak dikehendaki berlaku kepada saya ibu/bapa akan membantu saya.....1	2	3	
20. Hubungan saya yang rapat dengan ibu/bapa yang membawa kestabilan emosi dan kesejahteraan hidup.....1	2	3	

	Tidak Bersetuju 1	Tidak Pasti 2	Bersetuju 3
21. Saya boleh berbincang tentang keputusan yang penting dalam hidup dengan ibu/bapa saya.....	1	2	3
22. Ibu/bapa tidak bergantung kepada saya untuk kesejahteraan hidup.....	1	2	3
23. Saya boleh meminta nasihat dari ibu/bapa jika saya mempunyai masalah.....	1	2	3
24. Saya merasa ikatan emosi yang kukuh dengan ibu/bapa saya.....	1	2	3
25. Saya tidak boleh bergantung kepada bantuan ibu/bapa bila saya benar-benar memerlukan.....	1	2	3
26. Saya tidak berasa selesa berbicara mengenai masalah dengan ibu/bapa saya.....	1	2	3
27. Saya boleh bergantung kepada ibu/bapa pada masa kecemasan.....	1	2	3
28. Berbanding dengan rakan sebaya, bagaimanakah taraf kesihatan anda? 1. KURANG BAIK 2. SEDERHANA BAIK 3. BAIK 4. SANGAT BAIK			
29. Adakah kesihatan anda mempengaruhi anda menjalankan kerja- kerja yang diperlukan atau kerja-kerja yang hendak dijalankan? 1 TIDAK SEKALIPUN MENGHALANG 2 SEDIKIT MENGHALANG 3 SANGAT MENGHALANG			
30. Adakah kesihatan anda secara amnya membuat anda berasa bimbang? 1. TIDAK TAHU 2. TIDAK BIMBANG 3. SEDIKIT BIMBANG 4. SANGAT BIMBANG			

31. Pada pendapat anda, bagaimanakah taraf kesihatan ibu/bapa anda?
1. KURANG BAIK
 2. SEDERHANA BAIK
 3. BAIK
 4. SANGAT BAIK
32. Adakah rumah yang anda tinggal ini milik anda atau disewa oleh anda atau ahli keluarga anda?
1. KEPUNYAAN SENDIRI ATAU PASANGAN
 2. KEPUNYAAN AHLI KELUARGA LAIN
 3. SEWA SENDIRI ATAU SEWA OLEH PASANGAN
 4. AHLI KELUARGA LAIN SEWA
 5. LAIN-LAIN (NYATAKAN) _____
33. Berapa ramaikah orang yang biasa tinggal serumah dengan anda? Bilangan orang _____
34. Siapakah dan berapa ramaikah orang yang biasa tinggal bersama dirumah anda?
(Tandakan individu dan bilangan yang berkenaan)

BIL.	PERKARA	SIAPA (/)	BILANGAN
1.	Tiada siapa		
2.	Suami/isteri		
3.	Anak-anak perempuan		
4.	Anak-anak lelaki		
5.	Menantu perempuan		
6.	Menantu lelaki		
7.	Cucu		
8.	Ibu		
9.	Bapa		
10.	Adik beradik lelaki		
11.	Adik beradik perempuan		
12.	Mertua		
13.	Lain-lain (nyatakan		

Sila nyatakan YA (1) atau TIDAK (0) terhadap kenyataan-kenyataan di bawah.

- | | |
|---|---|
| 35. Anak-anak patut mendengar kehendak ibubapa kecuali yang bertentangan dengan agama.....1 | 0 |
| 36. Anak-anak tidak patut membahayakan ibubapa.....1 | 0 |
| 37. Anak-anak patut bersedia menolong ibubapa bila-bila masa.....1 | 0 |
| 38. Ibubapa tidak patut membahayakan anak-anak mereka...1 | 0 |
| 39. Anak-anak patut berdoa untuk kesihatan dan kesejahteraan ibubapa biarpun mereka telah meninggal dunia.....1 | 0 |
| 40. Ketaatan kepada bapa lebih utama dari ketaatan kepada ibubapa.....1 | 0 |
| 41. Anak-anak tidak patut mempekercilkan ibubapa.....1 | 0 |
| 42. Anak-anak tidak patut menceritakan keburukan ibubapa.....1 | 0 |
| 43. Adalah berdosa jika anak-anak salahlaku terhadap ibubapa.....1 | 0 |
| 44. Anak-anak patut menghormati dan bersopan santun bila berinteraksi dengan ibubapa.....1 | 0 |
| 45. Anak-anak tidak patut melawan atau meninggikan suara terhadap ibubapa.....1 | 0 |
| 46. Anak-anak patut membantu dari segi kewangan, jika ibubapa memerlukan.....1 | 0 |

Sila nyatakan kekerapan dan kenapakah perkara-perkara ini berlaku diantara anda dengan ibubapa anda pada tahun lepas

47. Berapa kerapkah anda melawat ibu/bapa anda di rumah mereka?

47b. Apakah tujuan lawatan anda? _____

48. Berapa kerapkah ibu/bapa anda melawat anda di rumah? _____

48b. Apakah tujuan ibu/bapa melawat anda? _____

49. Berapa kerapkah anda menulis surat kepada ibu/bapa anda? _____

49b. Kenapa? _____

50. Berapa kerapkah anda menerima surat dari ibu/bapa anda? _____

51. Berapa kerapkah anda membuat kerja-kerja ringan di rumah ibu/bapa anda seperti membersihkan atau mengemas rumah? _____

52. Berapa kerapkah ibu/bapa membuat kerja-kerja ringan di rumah anda seperti membersihkan atau mengemas rumah? _____

53. Berapa kerapkah anda membuat kerja-kerja berat dirumah ibu/bapa seperti menyusun perabot dan kerja di luar rumah? _____
54. Berapa kerapkah anda membawa ibu/bapa ke kedai runcit, membeli-belah atau berjumpa doktor? _____
55. Berapa kerapkah anda membawa buah tangan kepada ibu/bapa? _____
56. Berapa kerapkah anda memberi nasihat kepada ibu/bapa? _____
- 56b. Apakah nasihatnya? _____
57. Berapa kerapkah anda menerima nasihat dari ibu/bapa anda? _____
- 57b. Apakah nasihatnya? _____
58. Berapa kerapkah anda menolong ibu/bapa pada masa kecemasan (seperti kemalangan, kesakitan atau kematian)? _____
59. Berapa kerapkah anda memberi atau meminjamkan wang kepada ibu/bapa? _____
60. Berapa kerapkah ibu/bapa memberi atau meminjamkan wang kepada anda? _____
61. Berapa kerapkah ibu/bapa anda memberi pertolongan masa kecemasan? (seperti kemalangan, kesakitan atau kematian) _____
62. Berapa kerapkah ibu/bapa menjaga anak-anak anda? _____
63. Pernahkah anda menelefon ibu/bapa anda?
1- PERNAH 0- TIDAK PERNAH
- 63b. Kalau pernah, berapa kerapkah anda menelefon ibu/bapa anda? _____
- 63c. Adakah anda menggunakan telefon sendiri? _____
1- YA 0- TIDAK
- 63d. Kalau tidak ada telefon, dimanakah anda mengguna telefon untuk bercakap dengan ibu/bapa anda? _____

Saya ingin tanya pendapat anda mengenai tanggungjawab ibu dan bapa terhadap anak dewasa dan tanggungjawab anak dewasa terhadap ibu dan bapa.

64. Pada pendapat anda apakah tanggungjawab ibubapa terhadap anak dewasa?

Tanggungjawab ibu _____

Tanggungjawab bapa _____

65. Apakah tanggungjawab anak dewasa terhadap ibu/bapa?

ANAK	IBU	BAPA
Lelaki bujang		
Lelaki berkahwin		
Perempuan bujang		
Perempuam berkahwin		

Sekarang saya ingin tanya mengenai perasaan anda terhadap ibu/bapa anda. (Bulatkan jawapan).

- 0 - TIDAK SEDIKIT PUN
 1 - SEDIKIT
 2 - BOLEH TAHAN
 3 - BANYAK
 4 - TERLALU BANYAK

67. Berapa banyakkah ibu/bapa mempercayai anda?.....0 1 2 3 4
 68. Berapa banyakkah ibu/bapa mengambiltahu tentang anda?.....0 1 2 3 4
 69. Berapa banyakkah anda mempercayai ibu/bapa anda?.....0 1 2 3 4
 70. Berapa banyakkah anda mengambiltahu tentang ibu/bapa anda?.....0 1 2 3 4
 71. Bagaimanakah anda menilai hubungan keseluruhan anda dengan ibu/bapa anda? (Bulatkan jawapan)
 1. SANGAT TIDAK BAIK
 2. TIDAK BAIK
 3. SEDERHANA BAIK
 4. BAIK
 5. SANGAT BAIK

Saya ingin tanya tentang penglibatan anda dalam komuniti tempat anda tinggal.

72. Adakah anda menjadi ahli apa-apa persatuan di kawasan rumah anda ?

- 0 - TIDAK
 1 - YA (Jika YA, nyatakan nama pertubuhan)

73. Nama persatuan _____

74. Adakah anda memegang jawatan dalam persatuan tersebut?
0 - TIDAK
1 - YA
75. Nama jawatan dalam persatuan
1. Presiden
 2. Timbalan Presiden
 3. Setiausaha
 4. Timbalan Setiausaha
 5. Bendahari
 6. Ahli Biasa
76. Berapa jauhkah jarak masjid atau surau dari rumah anda?
 km/batu
77. Apakah jenis dan kekerapan aktiviti-aktiviti yang anda lakukan pada tahun lepas?

Aktiviti	Kekerapan

Akhir sekali saya ingin mendapatkan sedikit maklumat latarbelakang untuk menolong menginterpretasikan hasil kajian ini.

78. Apakah taraf perkahwinan anda?

- 1 BERKAHWIN
2 BERCERAI
3 BERPISAH
4 BALU/DUDA
5 TAK PERNAH KAHWIN

79. Berapakah bilangan anak anda yang masih hidup?

[illegible]

80. Berapakah bilangan adik beradik yang masih hidup ?

_____ LELAKI _____ PEREMPUAN

81. Berapakah jarak tempat tinggal anda dengan ibu/bapa anda?

82. Anda anak yang keberapa? _____

1 ANAK TUNGGAL	6 ANAK KELIMA
2 ANAK PERTAMA	7 ANAK KEENAM
3 ANAK KEDUA	8 ANAK KETUJUH
4 ANAK KETIGA	9 ANAK BONGSU
5 ANAK KEEMPAT	10 LAIN-LAIN (NYATAKAN) _____

83. Apakah tahap tertinggi persekolahan anda?

																				<u>TINGKATAN</u>											
SEKOLAH												KOLEJ/						LEPAS													
RENDAH						1-3		4-5		6		UNIVERSITI				IJAZAH															
-----						-----		-----		-----		-----				-----															
0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20+											
TAHUN BELAJAR																															

84. Adakah anda sekarang ini (atau pernah) bekerja?

1. YA, SEPENUH MASA (40 JAM/SEMINGGU)
2. YA, SEPARUH MASA (20 JAM/SEMINGGU)
3. YA, PERNAH BEKERJA DAN TELAH BERSARA
4. TIDAK BEKERJA DAN TIDAK BERSARA
5. TIDAK PERNAH BEKERJA
6. LAIN-LAIN (NYATAKAN) _____

85. Apakah jenis pekerjaan anda sekarang (atau sebelum ini)?

86. Adakah pasangan anda sekarang ini (atau pernah) bekerja?

1. YA, SEPENUH MASA (40 JAM/MINGGU)
2. YA, SEPARUH MASA (20 JAM/SEMINGGU)
3. YA, PERNAH BEKERJA DAN TELAH BERSARA
4. TIDAK BEKERJA DAN TIDAK BERSARA
5. TIDAK PERNAH BEKERJA

87. Apakah jenis pekerjaan pasangan anda?

88. Apakah sumber pendapatan isirumah anda pada tahun 1991. Berapa kerap dan banyakkah pendapatan dari sumber itu? (Tandakan semua yang berkenaan)

BIL	PERKARA	/	KEKERAPAN	UMLAH
1.	Kerja utama anda			
2.	Kerja utama pasangan			
3.	Sumbangan kewangan anak yang tinggal serumah			
4.	Sumbangan kewangan anak tidak tinggal serumah			
5.	Sumbangan barangan oleh anak-anak (beras, gula)			
6.	Sumbangan ahli keluarga lain			
7.	Bonus/Elaun			
8.	Saham			
9.	Pencen			
10.	Bantuan kebajikan			
11.	Sewa			
12.	Jualan hasil pertanian			
13.	Lain-lain			

Sekian, terima kasih.

APPENDIX B: MODIFIED INFORMED CONSENT FORM

MODIFIED INFORMED CONSENT FORM

Dear _____ :

Let me first introduce myself. My name is Tengku Aizan Hamid. I am a lecturer in the Department of Human Development Studies, Universiti Pertanian Malaysia. I am on study leave to pursue a graduate degree in Family Studies/Gerontology at Iowa State University, United States of America.

As part of my graduate program I am required to conduct research in an area related to my major emphasis. The title of my research is "Parent-adult child relationships: Correlates of filial responsibility." The objectives of the study are to investigate the perceptions of filial expectations and performance of filial responsibility among Malay families in Selangor, Malaysia.

This is an important area to study as the country has undergone and is still undergoing rapid urbanization and modernization that impinge on family life of Malaysians. Dual-worker families are on the rise. Moreover, rapid development leads to reduction in mortality and fertility rates, which augment the growing number of elderly people in the country. Further, the internal migration of youth to cities in search of employment have lessened their contacts with their parents. These developments call into question the feasibility of expecting traditional views of filial responsibility by adult children towards their aging parents, when family structures are undergoing modifications. Yet, we do not have information on the current practice of filial responsibility, a value we hold dear.

You have been selected to become a respondent in this survey. If you agree to participate, you will be asked to respond to a questionnaire that takes 30-45 minutes of your time to answer. The questionnaire is designed to provide information on the practice of filial responsibility and some sociodemographic information. However, your participation in the study is voluntary and you may withdraw from the study at any time. Your responses to the questionnaire will be treated in the strictest confidentiality. No names will appear in any document except when verification information is required. Your responses will be tabulated as aggregate numbers and used for academic purposes only.

Your contributions to the study is greatly appreciated. A summary of the results will be made available upon request.

Thank you.

APPENDIX C: PARENTS' AND ADULT CHILDREN'S FILIAL EXPECTATION
RESPONSES

Table 20. Parents' filial responsibility expectation

Statements	Agreement					
	Disagree		Not sure		Agree	
	N	%	N	%	N	%
1. Married child lives close to parent	20	10.1	8	4.0	170	85.9
2. Adult child takes care of parent in whatever way necessary when they are sick -	-	-	9	4.0	189	95.5
3. Adult child gives financial help	3	1.5	17	8.6	178	89.9
4. Adult child who lives close, visits at least once a week	8	4.0	13	6.6	177	89.4
5. Adult child who lives far, write letters at least once a week	33	16.7	33	16.7	132	66.7
6. Adult child feels responsible for parent	1	.5	3	1.5	194	98.0
7. Parent and adult child are together on festive occasions	1	.5	3	1.5	194	98.0
8. Parent can talk with adult child about important personal matters	5	2.5	8	4.0	185	93.4
9. Adult child gives emotional support to parent	1	.5	9	4.5	188	94.9
10. Adult child willing to sacrifice personal freedom to help parent	4	2.0	14	7.1	180	90.9
11. Adult child makes room for parent in home in an emergency	5	2.5	10	5.1	183	92.4
12. Adult child gives advice to parent when needed	6	3.0	21	10.6	171	86.4

Table 21. Adult children's filial responsibility expectation

Filial responsibility statements	Agreement					
	Disagree		Not sure		Agree	
	N	%	N	%	N	%
1. Married child lives close to parent	24	12.8	24	12.8	140	74.5
2. Adult child takes care of parent in whatever ways necessary to when they are sick	1	.5	-	-	187	99.5
3. Adult child gives financial help	4	2.1	17	9.0	167	88.8
4. Adult child who lives close, visit at least once a week	12	6.4	20	10.6	156	83.0
5. Adult child who lives far, write letters at least once a a week	26	13.8	45	23.9	117	62.2
6. Adult child feels responsible for parent	-	-	1	.5	187	99.5
7. Parent and adult child are together on festive occassions	1	.5	6	3.2	181	96.3
8. Parent can talk with adult child about important personal matters	2	1.1	10	5.3	176	93.6
9. Adult child gives emotional support	1	.5	12	6.4	175	93.1
10. Adult child willing to sacrifice personal freedom to help parent	4	2.1	23	12.2	161	85.6
11. Adult child makes room for parent in home in an emergency	-	-	3	1.6	185	98.4
12. Adult child gives advice to parent when needed	14	7.4	43	22.9	131	69.7

Table 21. Continued

Filial responsibility statements	Agreement					
	Disagree		Not sure		Agree	
	N	%	N	%	N	%
13. Adult child adjusts work schedule to help parent	15	8.0	26	13.8	147	78.2
14. When parents are unable to care for themselves, they can live with adult child in an emergency	7	3.7	14	7.4	167	88.8
15. Adult child adjusts family activities to help parent	3	1.6	24	12.8	161	85.6

APPENDIX D: PARENTS' AND ADULT CHILDREN'S FILIAL MATURITY
RESPONSES

Table 22. Distribution of parents' filial maturity agreement

Statements	Agreement					
	Disagree		Not sure		Agree	
	N	%	N	%	N	%
1. I can depend on my child to help if I really need it	8	4.0	8	4.0	182	91.9
2. I feel personally responsible for my child's well-being	-		8	4.0	190	96.0
3. If something went wrong, my child would come to my assistance	3	1.5	7	3.5	188	94.9
4. I have a close relationship with my child that provides me with a sense of emotional security and well-being	1	.5	3	1.5	194	98.0
5. I can talk to my child about important decisions in life	5	2.5	6	3.0	187	94.4
6. My child do not rely on me his/her well-being	20	10.1	39	19.7	139	70.2
7. I could turn to my child for advice if I were having problems	11	5.6	11	5.6	176	88.9
8. I feel a strong emotional bond with my child	1	.5	6	3.0	191	96.5
9. I can depend on my child for aid if I need it	8	4.0	12	6.1	178	89.9
10. I do not feel comfortable talking about problems with my child	128	64.6	15	7.6	55	27.8

Table 23. Adult children's filial maturity agreement

Filial maturity statements	Agreement					
	Disagree		Not sure		Agree	
	N	%	N	%	N	%
1. I can depend on my parent to help if I really need it	26	13.8	39	20.7	123	65.4
2. My parent depend on me for assistance	13	6.9	48	25.5	127	67.6
3. I feel personally responsible for parent's well-being	-	-	1	.5	187	99.5
4. If something went wrong, my parent would come to my assistance	4	2.1	26	13.8	158	84.0
5. I have a close relationship with my parent that provides me with a sense of emotional security and well-being	-	-	6	3.2	182	96.8
6. I can talk to my parent about important decisions in my life	2	1.1	7	3.7	179	95.2
7. My parent do not rely on me for his/her well-being	46	24.5	83	44.1	59	31.4
8. I could turn to my parent for advice if I were having problems	2	1.1	5	2.7	181	96.2
9. I feel a strong emotional bond with my parent	1	.5	12	6.4	175	93.1
10. I cannot depend on my parent for help if I really needed it	78	41.5	61	32.4	49	26.1
11. I do not feel comfortable talking about problems with my parent	134	71.3	20	10.6	34	18.1
12. I can count on my parent in an emergency	12	6.4	31	16.5	145	77.1

APPENDIX E: PARENTS' AND ADULT CHILDREN'S FILIAL BEHAVIOR
PERFORMANCE

Table 24. Parents' filial behavior performance

Statement	Frequency									Not relevant
	Never	Once a year	2-4 times a year	5-11 times a year	Once a month	2-3 times a month	Once a week	Every day	When needed	
1. Child visits parent	--	.5	1.5	7.1	17.7	13.1	38.4	19.7	2.0	--
2. Parent visits child	9.6	8.6	9.6	15.7	10.6	8.6	20.7	13.1	3.5	--
3. Writes letters	93.4	.5	1.0	3.0	.5	.5	--	--	1.0	--
4. Receives letters	87.9	1.0	.5	4.5	2.5	.5	.5	--	2.5	--
5. Child does heavy work	29.3	10.6	5.6	19.7	4.0	4.5	7.6	1.5	17.2	--
6. Child does light work	13.6	4.5	2.0	16.7	7.1	9.6	25.8	5.1	15.7	--
7. Parent does light work	66.7	6.6	1.0	9.1	3.5	2.5	3.5	1.0	6.1	--
8. Parent does heavy work	82.8	4.5	1.5	3.5	1.0	--	--	--	6.6	--
9. Child receives advice	5.1	4.0	6.1	20.2	10.6	5.6	21.2	3.5	23.7	--
10. Parent receives advice	22.7	4.5	7.1	28.8	5.6	3.0	14.1	1.5	12.6	--
11. Parent helps child in emergency	24.2	9.1	4.5	7.6	2.5	2.0	3.0	--	47.0	--
12. Child helps parent in emergency	20.7	5.1	2.5	5.1	3.0	1.0	6.1	--	56.6	--
13. Parent gives/lends money	55.6	6.6	4.0	9.1	2.5	.5	.5	--	21.2	--
14. Child gives/lends money	14.1	2.0	1.0	13.6	50.5	2.0	4.0	--	12.6	--

Table 24. Continued

Statement	Frequency									Not rele- vant
	Never	Once a year	2-4 times a year	5-11 times a year	Once a month	2-3 times a month	Once a week	Every day	When needed	
15. Child takes parent to grocery/shopping/ doctor	27.8	5.1	5.6	10.1	3.5	4.5	5.1	.5	37.9	--
16. Child brings gifts on visit	3.0	2.5	1.0	24.2	12.6	9.6	40.9	5.1	1.0	--
17. Parent takes care of grandchild	31.3	1.0	1.0	11.6	4.0	1.0	11.6	30.3	8.1	--
18. Parent telephones child	.5	--	3.0	5.6	6.6	8.1	12.6	2.5	20.2	40.9

Table 25. Adult children's filial behavior performance

Filial behavior	Frequency									
	Never	Once a year	2-4 times a year	5-11 times a year	Once a month	2-3 times a month	Once a week	Every day	When needed	Not relevant
1. Child visits parent	.5	.5	.5	2.7	13.3	16.0	35.1	30.9	.5	--
2. Parent visits child	10.1	2.7	8.0	17.6	13.3	9.6	19.7	18.1	1.1	--
3. Writes letters	98.9	.5	.5	--	--	--	--	--	--	--
4. Receives letters	96.8	.5	1.6	.5	.5	--	--	--	--	--
5. Child does light work	14.9	1.1	5.3	17.6	12.8	13.8	29.8	4.8	--	--
6. Parent does light work	67.6	--	9.0	12.2	4.8	.5	4.3	1.1	.5	--
7. Child does heavy work	59.9	1.6	9.6	22.9	10.1	4.8	7.4	1.1	2.7	--
8. Child takes parent to grocery/shopping/doctor	21.3	2.7	20.2	36.2	6.4	5.9	2.1	.5	4.8	--
9. Child brings gifts on visit	2.1	--	5.3	19.7	19.7	20.7	28.2	4.3	--	--
10. Parent receives advice	25.0	1.1	17.0	31.9	8.0	7.4	8.5	.5	.5	--
11. Child receives advice	4.3	.5	13.3	33.0	14.9	16.5	13.8	2.1	1.6	--
12. Child helps parent in emergency	25.5	2.7	22.3	31.9	5.9	4.3	3.7	--	3.7	--
13. Parent helps child in emergency	39.9	3.2	25.5	20.7	3.2	1.6	1.1	--	4.8	--

Table 25. Continued

Filial behavior	Frequency									
	Never	Once a year	2-4 times a year	5-11 times a year	Once a month	2-3 times a month	Once a week	Every day	When needed	Not rele- vant
14. Child gives/ lends money	18.1	3.2	6.9	34.6	33.0	1.6	2.1	--	.5	--
15. Parent gives/ lends money	63.8	4.3	18.6	9.0	2.7	--	.5	--	1.1	--
16. Parent takes care of grandchild	42.6	2.7	13.8	16.0	4.8	4.3	7.4	6.9	1.6	--
17. Child telephones parent	.5	--	.5	3.7	3.7	6.4	15.4	3.2	12.2	54.3

APPENDIX F: BIVARIATE CORRELATIONS OF PARENTS, MOTHERS, AND
FATHERS

Table 26. Correlation matrix of variables for parents

	1	2	3	4	5	6
Gender	1.000					
Age	0.055	1.000				
Marital status	0.400**	-0.173*	1.000			
Employment	0.158*	-0.180*	0.125	1.000		
Education	0.570**	-0.078	0.249**	0.055	1.000	
Number of children	0.141*	-0.101	0.097	0.158*	0.142*	1.000
Health	-0.092	0.291**	-0.027	-0.131	-0.128	-0.153
Overall relationship	-0.055	-0.154*	0.131	0.067	0.038	0.125
Religiosity	-0.136	-0.088	-0.043	-0.014	0.004	-0.134
Income	0.152*	-0.184**	0.130	-0.020	0.193**	0.153*
Reverence	0.019	0.082	-0.045	-0.135	0.091	-0.019
Expectation	-0.146*	-0.070	-0.136	0.094	-0.055	0.048
Behavior	-0.142*	-0.063	-0.058	0.127	-0.014	-0.016
Maturity	-0.188**	0.031	-0.110	-0.032	-0.062	0.093
Affection	-0.129	-0.021	0.115	-0.024	-0.082	0.029

*Significant at ≤ 0.05 .

**Significant at ≤ 0.01 .

7	8	9	10	11	12	13	14	15
1.000								
-0.063	1.00							
0.064	-0.004	1.000						
0.031	-0.094	-0.012	1.000					
0.024	-0.002	-0.054	-0.101	1.000				
-0.067	0.094	0.099	0.026	0.127	1.000			
0.043	0.202**	-0.023	-0.126	0.090	0.081	1.000		
-0.132	0.159*	0.061	0.055	0.101	0.352**	0.152	1.000	
0.010	0.448**	0.055	-0.169*	0.133	0.142*	0.218**	0.154*	1.000

Table 27. Correlation matrix of variables for mothers

	1	2	3	4	5	6
Age	1.000					
Marital status	-0.171	1.000				
Employment	-0.167	-0.040	1.000			
Education	-0.169	0.053	-0.078	1.000		
Number of children	-0.053	0.038	0.145	0.109	1.000	
Health	0.288**	0.020	-0.072	-0.101	-0.250**	1.000
Overall relationship	-0.336**	0.110	0.114	0.161	0.162	-0.066
Religiosity	-0.120	-0.011	0.107	0.115	-0.230*	0.054
Income	-0.345**	0.059	0.178	0.402**	0.028	-0.079
Reverence	0.098	-0.034	-0.333**	0.111	-0.032	0.007
Expectation	0.114	-0.240*	-0.020	-0.036	-0.089	-0.096
Behavior	-0.119	-0.098	0.067	0.010	-0.132	0.066
Maturity	0.041	-0.122	-0.055	0.020	-0.092	-0.106
Affection	-0.107	0.259**	0.019	0.062	-0.045	0.007

*Significant at ≤ 0.05 .

**Significant at ≤ 0.01 .

7	8	9	10	11	12	13	14
1.000							
0.024	1.000						
0.318**	0.143	1.000					
0.038	-0.700	-0.052	1.000				
0.018	0.172	0.105	0.197*	1.000			
0.224*	0.020	0.074	0.172	0.088	1.000		
0.050	0.099	0.076	0.207*	0.396**	0.188	1.000	
0.383**	0.019	0.197*	0.207*	0.168	0.210	0.214*	1.000

Table 28. Correlation matrix of variables for fathers

	1	2	3	4	5	6
Age	1.000					
Marital status	-0.297**	1.000				
Employment	-0.213*	0.222*	1.000			
Education	-0.085	-0.076	0.011	1.000		
Number of children	-0.168	0.060	0.134	0.015	1.000	
Health	0.313**	-0.004	-0.158	-0.098	-0.033	1.000
Overall relationship	0.033	0.274**	0.045	-0.090	0.105	-0.071
Religiosity	-0.027	0.076	-0.129	0.044	0.066	0.052
Income	-0.181	0.123	-0.052	0.058	0.192	0.090
Reverence	0.062	-0.110	0.076	0.065	-0.009	0.055
Expectation	-0.156	0.017	0.183	0.152	0.160	-0.080
Behavior	0.188	-0.094	0.133	-0.043	0.034	-0.008
Maturity	0.046	0.014	0.019	0.147	0.240*	-0.188
Affection	0.074	0.083	-0.022	-0.192	0.140	-0.018

*Significant at ≤ 0.05 .

**Significant at ≤ 0.01 .

7	8	9	10	11	12	13	14
1.000							
-0.071	1.000						
-0.229*	-0.055	1.000					
-0.057	-0.008	-0.169	1.000				
0.130	0.029	0.042	0.112	1.000			
0.167	-0.128	-0.192	-0.028	0.053	1.000		
0.215**	-0.000	0.089	0.064	0.319**	0.114	1.000	
0.506**	0.071	-0.280**	0.046	0.112	0.196	0.105	1.000

APPENDIX G: BIVARIATE CORRELATIONS OF ADULT CHILDREN,
DAUGHTERS, AND SONS

Table 29. Correlation matrix of variables for adult children

	1	2	3	4	5
Gender	1.000				
Age	-0.076	1.000			
Marital status	0.087	0.106	1.000		
Education	0.397**	-0.486**	-0.024	1.000	
Employment	0.432**	-0.136	-0.125	0.366**	1.000
Number of children	-0.144*	0.615**	0.308**	-0.452**	-0.217**
Health	-0.037	-0.080	-0.105	0.144*	0.131
Proximity	0.101	-0.267**	-0.199**	0.375**	0.218**
Birth order	-0.011	-0.348**	-0.108	0.126	-0.021
Overall relationship	-0.037	-0.042	0.012	0.081	-0.041
Parents' health	-0.126	-0.243**	0.150*	0.074	-0.057
Religiosity	-0.042	0.107	0.095	0.051	-0.072
Income	0.091	-0.061	0.224**	0.463**	0.245**
Sibling	0.177*	-0.214**	0.025	0.093	0.068
Expectation	-0.195**	0.019	-0.079	-0.068	-0.122
Maturity	-0.230**	-0.195**	-0.010	0.113	-0.062
Behavior	-0.236**	-0.018	0.078	-0.130	-0.075
Reverence	-0.082	-0.055	0.045	0.083	0.079
Affection	0.025	-0.056	0.112	-0.012	0.076

*Significant at ≤ 0.05 .

**Significant at ≤ 0.01 .

6	7	8	9	10	11
1.000					
-0.168*	1.000				
-0.222**	0.170*	1.000			
-0.280**	0.185*	-0.043	1.000		
-0.133	0.061	0.013	-0.010	1.000	
-0.069	-0.137	-0.096	0.036	-0.052	1.000
0.167*	-0.063	0.061	-0.211**	0.125	0.162*
-0.014	0.126	0.246**	-0.102	0.141	-0.013
-0.188**	0.091	0.014	0.282**	-0.022	0.157*
-0.018	-0.041	-0.045	0.059	0.100	0.145*
-0.158*	-0.094	0.011	0.024	0.069	0.170*
0.134	0.035	-0.187*	0.136	0.105	-0.088
0.088	-0.027	0.124	-0.084	0.054	0.095
0.014	0.035	0.169*	-0.030	0.184*	-0.117

Table 29. Continued

12	13	14	15	16	17	18	19
1.000							
0.307**	1.000						
-0.033	-0.017	1.000					
0.010	-0.128	0.028	1.000				
-0.015	0.005	-0.148*	0.344**	1.000			
-0.037	-0.067	-0.074	-0.002	0.243**	1.000		
0.187*	0.153*	-0.070	0.096	0.155*	-0.067	1.000	
-0.053	0.090	0.076	-0.095	-0.015	0.167*	-0.018	1.000

Table 30. Correlation matrix of variables for daughters

	1	2	3	4
Age	1.000			
Marital status	-0.095	1.000		
Education	-0.536**	0.013	1.000	
Employment	-0.140	-0.320**	0.315**	1.000
Number of children	0.586**	0.243*	-0.473**	-0.272**
Health	-0.177	-0.100	0.173*	0.205*
Proximity	-0.234*	-0.166	0.310**	0.258**
Birth order	-0.380**	-0.012	0.190	0.038
Overall relationship	0.062	0.000	0.072	-0.030
Parent's health	-0.305**	0.218*	0.190	0.011
Religiosity	0.101	0.115	0.134	-0.115
Income	-0.186	0.216*	0.446**	0.238*
Sibling	-0.224*	0.097	0.092	0.007
Expectation	-0.027	-0.024	0.097	-0.025
Maturity	-0.204*	0.111	0.212*	0.182
Behavior	-0.008	-0.008	-0.037	0.036
Reverence	-0.111	-0.007	0.026	0.017
Affection	-0.141	0.079	0.163	0.068

*Significant at ≤ 0.05 .

**Significant at ≤ 0.01 .

5	6	7	8	9	10	11
1.000						
-0.136	1.000					
-0.137	0.209*	1.000				
-0.338**	0.167	-0.120	1.000			
0.031	-0.044	-0.057	-0.015	1.000		
-0.170	-0.083	-0.003	0.094	-0.082	1.000	
0.149	-0.025	0.022	-0.193*	0.134	0.196*	1.000
-0.042	0.075	0.228*	-0.126	0.086	0.077	0.332**
-0.200*	0.118	-0.076	0.286**	-0.120	0.266**	-0.093
-0.090	-0.084	-0.033	0.144	0.166	0.217*	0.151
-0.186	-0.110	0.082	0.027	0.065	0.243*	0.100
0.083	0.071	-0.166	0.226**	0.065	-0.173	0.047
0.047	0.007	0.090	-0.093	0.058	0.201*	0.203*
-0.033	0.047	0.277**	-0.090	0.272**	-0.076	-0.011

Table 30. Continued

12	13	14	15	16	17	18
1.000						
-0.027	1.000					
0.015	0.121	1.000				
0.112	0.022	0.378**	1.000			
-0.045	0.076	-0.026	0.137	1.000		
0.150	-0.055	0.257**	0.258**	-0.104	1.000	
0.188	0.078	-0.079	-0.018	0.008	-0.073	1.000

Table 31. Correlation matrix of variables for sons

	1	2	3	4
Age	1.000			
Marital status	0.404**	1.000		
Education	-0.458**	-0.174	1.000	
Employment	-0.082	0.171	0.110	1.000
Number of children	0.648**	0.446**	-0.392**	0.035
Health	0.033	-0.125	0.105	-0.028
Proximity	-0.291**	-0.277*	0.425**	0.098
Birth order	-0.314**	-0.268**	0.082	-0.150
Overall relationship	-0.172	0.041	0.144	-0.025
Parent's health	-0.196	0.070	0.069	-0.035
Religiosity	0.111	0.073	-0.008	0.073
Income	0.086	0.225*	0.492**	0.238*
Sibling	-0.183	-0.150	-0.067	-0.049
Expectation	0.034	-0.116	-0.075	-0.080
Maturity	-0.233*	-0.103	0.246*	-0.167
Behavior	0.010	0.282**	-0.047	0.020
Reverence	0.025	0.125	-0.091	0.125
Affection	0.043	0.162	-0.239*	0.085

*Significant at ≤ 0.05 .

**Significant at ≤ 0.01 .

5	6	7	8	9	10	11
1.000						
-0.190	1.000					
-0.301**	0.120	1.000				
-0.205	0.212	0.055	1.000			
-0.377**	0.203	0.104	-0.004	1.000		
0.030	-0.204	-0.187	-0.054	-0.021	1.000	
0.185	-0.115	0.125	-0.242**	0.109	0.097	1.000
0.052	0.181	0.252*	-0.070	0.220*	-0.106	0.288**
-0.114	0.039	0.094	0.291**	0.149	0.047	0.092
-0.001	0.047	-0.188	0.041	0.018	0.017	-0.182
-0.217*	-0.106	-0.004	0.018	0.075	0.053	-0.163
0.133	-0.102	-0.173	0.006	0.058	-0.046	-0.197
0.177	-0.079	0.151	-0.071	0.057	-0.034	0.172
0.085	0.017	0.042	0.052	0.071	-0.168	-0.112

Table 31. Continued

12	13	14	15	16	17	18
1.000						
-0.043	1.000					
-0.242*	-0.005	1.000				
-0.049	-0.268*	0.264*	1.000			
-0.051	-0.210	-0.077	0.269*	1.000		
0.143	-0.136	-0.067	0.107	0.030	1.000	
-0.032	0.065	-0.106	- 0.001	0.408**	0.052	1.000